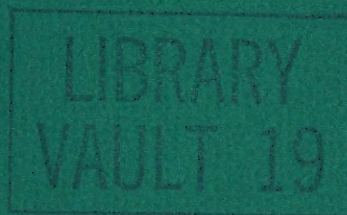
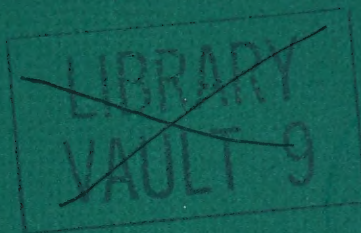


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1963



YEARS OF PROGRESS

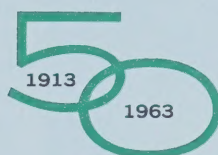
UNIVERSITY OF ALBERTA HOSPITAL
FORTY-FIRST ANNUAL REPORT



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Original Strathcona Hospital



YEARS OF PROGRESS

FORTY - FIRST ANNUAL REPORT FOR THE YEAR ENDING DECEMBER 31, 1963
UNIVERSITY OF ALBERTA HOSPITAL • EDMONTON

University of Alberta Hospital today



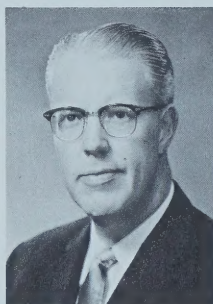
UNIVERSITY OF ALBERTA HOSPITAL BOARD



D. J. AVISON
Chairman



Dr. W. JOHNS
President
University of Alberta



Dr. W. C. MacKENZIE
Dean of Medicine



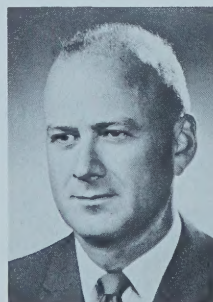
E. A. CHRISTENSON



K. J. HAWKINS



E. A. D. McCUAIG



G. K. WYNN

A HALF CENTURY OF PROGRESS

Fifty years ago, with the laying of the cornerstone of the Strathcona Hospital by Mayor Short of the newly-amalgamated City of Edmonton, the development of the building complex now known as the University of Alberta Hospital was commenced. Staff members who have served the hospital for many years swear that construction has never stopped, and that workmen have been tearing down or building up sections of the hospital ever since. While this is probably an exaggeration, it has taken a great deal of planning and work over the years to increase the hospital from the original 84 beds serving the general community needs of South Edmonton, to the sprawling medical centre complex we know today. With a potential of over 1,100 beds, the University Hospital now serves in a multiple role of metropolitan general hospital, major referral centre, teaching institution, and clinical research centre.

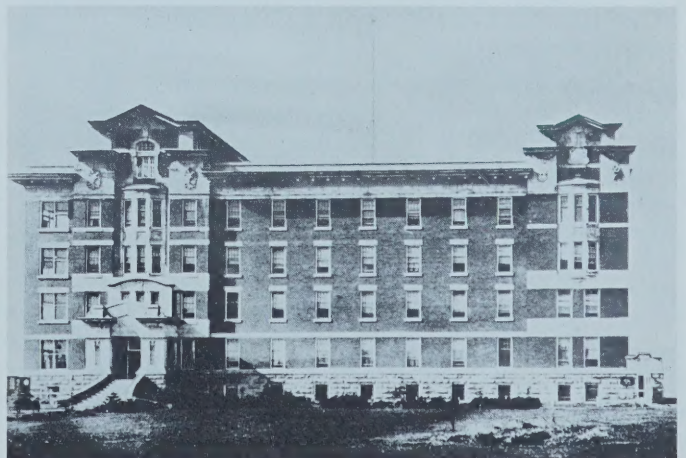
Prior to the development of the first unit of the Strathcona Hospital, the residents south of the North Saskatchewan River had been served by a cottage hospital located on 78th Avenue between 104th and 105th Streets. The organization of this house of healing undoubtedly set some sort of record even for those days of active development, as it was less than a month from the time of approval of the project by the Strathcona Council until the first patients were admitted. As is common in hospital operation even today, the demand for beds soon exceeded the supply, and in a short time the facility was moved to the second floor of the old Oddfellows' Hall on the South Side. With its meagre staff strongly supported by many volunteer workers, this first hospital provided yeoman service through the epidemics of disease that were so common in those early years, and filled the needs of a growing community.

The first unit of the present hospital, now known as the 1912 wing, was actually completed late in 1913, and admitted its first patients early in 1914. Its life as a community hospital was short lived as national needs brought about by Canadian casualties in World War I prevailed over local requirements, and on December 1, 1916, the City of Edmonton leased the building to the Federal Military Hospital Commission for use as a military hospital. From that date until November, 1922, it served in this capacity, and a large number of sick and wounded soldiers from Western Canada were rehabilitated for their return to civilian life within its wards.



First Strathcona Hospital

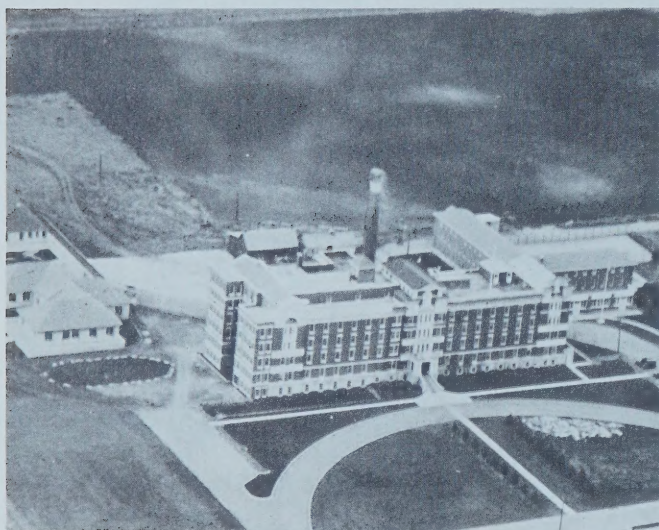
1913–1963



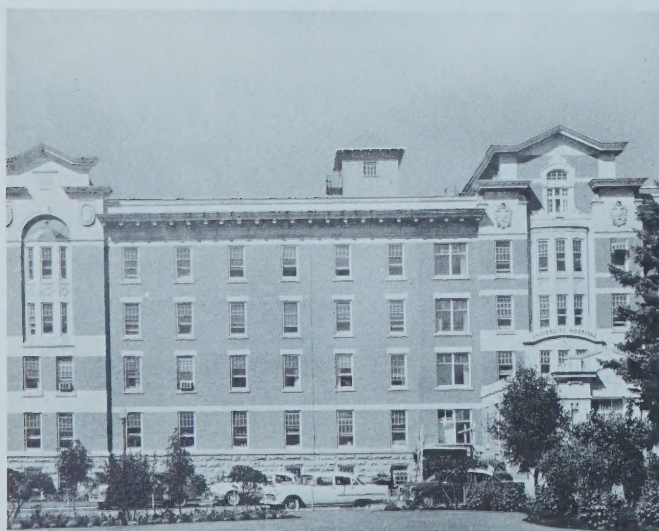
University Hospital 1923

This agreement started the close relationship that has existed between the University Hospital and the federal department responsible for the care of military and veteran personnel, now the Department of Veterans' Affairs. This has proven to be a most efficient and satisfactory arrangement, and in 1962 it was used by the Glassco Commission as the basis of its recommendations that the federal responsibility in this field be carried out in a similar fashion in other parts of the country.

When the hospital was turned over to the University of Alberta in 1922, the veterans were not forgotten. The Wells, or South, Pavilion, which now houses a number of long-term domiciliary-care patients for the Department of Veterans' Affairs, was constructed in that year. It served the Department's needs in Northern Alberta through the hungry thirties and well into World War II.



Early Aerial View



1929 Wing

When ownership was transferred to the University, the hospital entered a short era of direct control by the Board of Governors of that institution of higher learning. A Board of Management was appointed and the medical staff was organized to provide a close relationship between the Faculty of Medicine and the teaching hospital. This mutually-beneficial relationship has persisted throughout the years and has insured a close co-ordination of effort between the university faculty and the clinical teaching areas it needs to produce well-trained personnel for the health fields.

For a number of reasons the direct control of the hospital by the University did not function as smoothly as had been expected, and on March 20, 1929, an "Act Respecting the University of Alberta Hospital" was proclaimed. This provided for an autonomous hospital board responsible to the Board of Governors of the University, and the Lieutenant Governor in Council of the Province. Each of these authorities was responsible for the appointment of an equal number of trustees, and authority was provided for the operation of a teaching hospital by this Board. The inclusion of the Provincial Cabinet in the line of administrative authority established another relationship that has persisted until the present time. The Province is, in effect, the owner of the hospital, and in this role it has, through the years, provided assistance and advice through its various departments, particularly the Provincial Auditor, the Department of Public Works, and the Department of Public Health. The tremendous development that has gone on since World War II has been due in no small measure to

the activities of the Department of Public Works and its administrators, planners, architects, and engineers. While this direct relationship was terminated in 1962 to bring the hospital more directly into line with the requirements of the provincial hospitalization plan, the hospital still obtains and appreciates the advice of representatives of this provincial department. The Provincial Auditor continues to be responsible for the annual audit of the hospital, and for the pre-audit procedures carried out in the accounting department.

Soon after the hospital was administratively separated from the University, it was enlarged by the addition of the 1929 wing. This unit, which now houses nursing stations 32, 42, and so forth, provided an additional 122 beds, and it was opened on October 17, 1930. It came into service as the nation was plunged into the great economic depression known as the "dirty thirties", and while the existence of the whole hospital was at times threatened by an almost complete lack of funds, it survived. This survival is due in no small measure to the loyalty and devotion of the men and women who administered and staffed the hospital in those lean years, and the University Hospital entered its second world conflict in 1939 with the staff and the ability to once again fill its role as a major military hospital.

Under the pressure created by large numbers of casualties, it soon became evident that the facilities were too small, and in 1943 it was agreed that a 250-bed addition would be rushed to completion. This is now known as the Colonel Mewburn Pavilion in honour of a pioneer military surgeon of Western Canada, and first Professor of Surgery at the University, Dr. F. H. Mewburn. The Colonel's picture, along with that of his late son, Dr. F. H. H. Mewburn, now hangs outside the office of the Director of Orthopaedic Surgery on the second floor of the hospital. The new pavilion was designed and constructed quickly to meet an emergent situation and it therefore provided little more than large open wards for bed space, and areas for the offices and clinics of the Department of Veterans' Affairs staff. It was, and still remains, entirely dependent on the main hospital for all services, and while its large wards now appear to be somewhat antiquated, there are many who feel that better patient supervision and nursing care can be provided there at a more reasonable cost than in our more modern small units.

The rapid development that occurred in Alberta as a whole, and in the Edmonton area in particular, in the years that followed World War II, sparked an era of development in the University Hospital that has continued at a steady pace with few minor lulls ever since. One of the first major developments was the construction of a proper School of Nursing and Student Nurses' Residence. While nursing education had been carried out in the hospital since 1923, it had never been provided with centralized facilities of any sort. Students were taught in classrooms in the hospital building and were billeted in a number of so-called residences scattered throughout the Garneau area. This undesirable situation was relieved in 1947 when the first unit of the present students' residence and school was opened. With the addition of the second unit in 1951, the hospital was provided with the proper facilities to produce the hundreds of excellent nurses who are proud to call the University Hospital their alma mater.



Colonel Mewburn Pavilion

The buoyant economy of the province and the rapid increase in population that occurred in the early fifties, created an urgent need for additional beds, and the two large patient wings that now form the impressive south front of the hospital were added. The building now housing the nursing stations identified by numbers ending in 3 and 4,



Nurses' Residence

was completed in 1951. The most modern patient wing, commonly referred to as the polio wing, because of its primary purpose of providing proper rehabilitative care to victims of poliomyelitis, houses nursing stations identified by the final digits 5, 6, and 7. It was opened in 1958, and while its original purpose has thankfully been minimized by public health measures that have provided a considerable control over poliomyelitis, its facilities are used to the fullest extent by a number of clinical departments.

In 1956 the senior administrators of the hospital joined forces with the Department of Public Works in the development of a master plan to provide in the University Hospital an efficient and balanced complex that would serve for many years as the major referral,

teaching, and clinical research centre for the province. The addition of large numbers of beds had sadly taxed the ability of special service departments — such as radiology, clinical laboratories, operating rooms, and case rooms—to cope with the large influx of patients, and as a result it became impossible to maintain efficient utilization of the space available on the wards. The same pinch was being felt in the general service departments such as laundry and dietary. A well organized plan, providing for a major redevelopment in progressive but continuing steps under the direction of the Department of Public Works, was approved by the Lieutenant Governor in Council and quickly started.

The clinical services wing was the key to the whole reorganization of patient services and it was given top priority. It was planned to house all of the special services required in the diagnosis and treatment of in-patients and out-patients in a modern double-corridor structure. The plans provided a direct horizontal relationship between special areas and the wards of the appropriate specialties that would use them. When it was opened in 1960, it provided the most modern concept of a clinical services area then in existence, and while the facilities it provides have resulted in a large increase in hospital costs, it has enabled the medical staff of the hospital to provide a complete range of services in all specialties to an ever increasing number of patients.



South Front

The enlarged and improved facilities provided in the hospital, together with the enthusiasm of the Dean of Medicine, Dr. W. C. MacKenzie, and the directors of the various clinical departments and divisions, made Edmonton increasingly attractive to a large number of young, well-trained specialists. The addition of these physicians to the dedicated group that already formed the nucleus of the medical school, has resulted in the

development in the Faculty of Medicine and the University Hospital of a medical centre that is widely known for the quality of its patient care, teaching, and research. This in turn has attracted large numbers of young doctors from all over the world for graduate training in the various specialties, and we now have nearly 140 of these graduate students on staff. The need for housing in this regard was partially met by the opening of the House Staff Residence in 1958.

The general service in the hospital was markedly improved in 1961 with the opening of the new laundry building. One of the most modern of its kind in existence, this plant now handles over 18,000 pounds of linen a day and has capacity to spare for additional demands that might be made on it in the future. The provision of adequate food service still remains a major problem, and planning is now under way for a modern kitchen and servery that should enable the staff to provide all patients with hot and appetizing meals.

While the clinical services wing was being constructed, the Medical Superintendent of the hospital, Dr. A. C. McGugan, entrusted to his assistant, Dr. B. Snell, and the Business Administrator, Mr. L. R. Adshead, the task of formulating a progressive plan for the reorganization and renovation of the ward areas to relate them properly to the service areas that would be provided. In consultation with representatives of the medical and nursing staffs, a plan was developed that would result in a properly-balanced and efficient hospital. This was then presented to the planners in the Department of Public Works, and when the service areas were finally concentrated in the new wing, the program of ward renovation was undertaken. With the retirement of Dr. McGugan in 1960, Dr. Snell became Medical Superintendent and Mr. Adshead assumed the position of Administrator. They continued to work closely with the provincial department on the planning of the program.

The project was carefully planned with a view to creating as little interruption as possible in the normal operation of the hospital. The 1912 and 1929 wings were completely modernized, and as the various nursing areas were completed they were occupied by units from sections of the 1951 building which were scheduled for conversion in the next phase of the renovation program. The Obstetrical Department was moved into its final location on the sixth floor where it is provided with new delivery room and nursery facilities that assure each mother and baby of the best possible care. Other departments were not so fortunate and some still occupy nursing units on a temporary basis and will not reach their proper locations until the final steps of the 1956 plan are completed.

In 1961 Mr. Adshead was chosen to head the Foothills Provincial General Hospital being developed in Calgary, and Dr. J. D. Wallace was appointed Executive Director in his place. Shortly thereafter the Director of Nursing, Miss Jeanie S. Clark, left to take up a similar appointment at the Foothills, and Miss M. Geneva Purcell of the Royal Victoria Hospital in Montreal was chosen to replace her. These new members of the administrative team joined Dr. Snell and Business Administrator Mr. George C. Sherwood in a determined effort to keep the development plan moving.



Clinical Services Wing



DR. W. C. MacKENZIE
Dean,
Faculty of Medicine



DR. A. C. McGUGAN



DR. B. SNELL



New Nursery Area



MR. L. R. ADSHEAD



DR. J. D. WALLACE



MISS JEANIE S. CLARK



MISS M. GENEVA
PURCELL



MR. GEORGE C.
SHERWOOD

Plans had been prepared by the Department of Public Works for a large multi-purpose teaching auditorium, a new incinerator building, and the renovation of areas previously used as delivery rooms and nurseries for use as nursing units. These plans were in their final stages by mid-1962, and it was hoped that the construction and renovation program would continue without interruption when the 1912 and 1929 wings were put back into service.

However this was not to be. Late in 1962, under a major policy revision within the government, the direct responsibility for the development of facilities at the University Hospital was removed from the Department of Public Works and given to the Hospitals Division of the Department of Public Health. While this provided obvious advantages to the operation of the provincial hospitalization plan as a whole, it has resulted in an unfortunate delay in the renovation program. In order to meet the requirements of the Alberta Hospitals Act and its regulations, it has been necessary to scrap plans that were already made and start all over again to organize the projects that still have to be completed. Progress has been slow in this regard, and as 1963 drew to a close approval to continue with the program had still not been received and considerable areas of potential ward space remained unoccupied.

The University of Alberta Hospital enters its second half-century of service to the community with considerable optimism as to its future. There is no doubt that, even though the development plan is temporarily delayed, it will eventually be completed. The final result will be a well-balanced and efficient teaching hospital that will be capable of meeting the demands placed upon it for many years to come. Under the general direction of a progressive Board of Trustees, and with the support of well-organized and dedicated administrative, medical, nursing, technical, and general service staffs, this large medical centre, which had its humble beginning fifty years ago, appears destined for even greater success in the future.



House Staff Residence

REPORT OF THE EXECUTIVE DIRECTOR

Once again it is my pleasure to present to the Board of Trustees and to the owners of the University Hospital, the people of the Province of Alberta, my report on the progress that has been made during a very active year. While 1963 was significant in many ways, it was of particular importance in an historical sense as it marked the 50th anniversary of the founding of the hospital. In recognition of this event, the report of the Executive Director takes a new form this year in the presentation of background information that should be of interest to members of the staff and to all those who look to the University Hospital for continuing leadership in the fields of patient care, education, and clinical research.

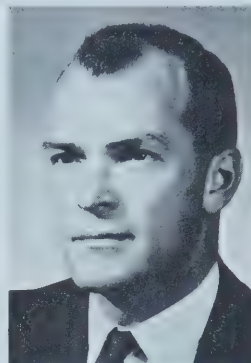
Detailed reports on the activities of the three major administrative divisions of the hospital—Medical, Nursing, and Business Administration—will be presented in the pages that follow by the executive officers in charge of those areas. It is therefore necessary for me to provide only a few general remarks to introduce the report, and to officially recognize a special event in the presentation of a concise history of the development of the University Hospital.

As you scan the reports of the various activities of the hospital during the year 1963, you will note that it has been another period of continuing development and of improving utilization of the facilities that have been provided. We have provided better care and more diversified service to more patients than we did in any previous year. The innovation of confirmed bookings for bed and operating room time has given better service to patients from all over the Province. The development of a ward system of bed assignment has enabled the members of the medical staff to make better use of the hospital accommodation assigned to them, and to admit their patients on the basis of need rather than chance. This in turn has resulted in a more rapid turn over of patients and a sharp decrease in the waiting lists of a number of departments.

This rise in activity has resulted in an increase in the intensity of care provided in all areas of the hospital. This has been most evident in the Nursing Service in which the heavier load of post-operative and seriously-ill patients has necessitated an increase in staffing patterns. Additional nurses, aides, and orderlies have been authorized by the Board to meet the demand, and on many occasions during periods of peak activity, and particularly during the summer months, the regular staff has been supplemented by members of the University Hospital Nursing Reserve. By the end of 1963 the membership in the Reserve stood at well over 100, and these nurses respond frequently and well to the needs of the hospital.

The frustrations that became evident in 1962 with regard to the financing of hospital operation, and the delay in the necessary renovation and construction programs, continued during 1963. However, after a considerable amount of research into both problems, the Hospital Board took positive steps in both fields and submitted constructive briefs to the Provincial Cabinet. As a result of this approach and the discussions that followed each presentation, it appeared that steps might be taken in the near future to provide the authority and the funds for a more effective hospital operation.

The Disaster Plan of the hospital was finalized early in the summer and passed its test run in October with flying colors. While several minor flaws were detected during the handling of one hundred simulated casualties in just over half an hour, it was evident to all that the community can depend on the University Hospital for a prompt and effective response should a major disaster occur.



J. D. WALLACE, M.D.
Executive Director

The new Constitution and By-Laws of the hospital was completed during the year. It provides a more realistic approach to administrative organization, and it will provide the trustees with a greater opportunity to become familiar with the hospital as a whole and to provide the leadership that is necessary for progress.

The labour agreement signed at the start of the year by the Board and the Civil Service Association provided the background for better and more constructive relations between employees and management. While final approval of the agreement has not yet been provided by government, the arrangement is working well on the basis of a "gentleman's agreement" between the Association and the Board.

It has been a privilege for me to have guided the activities of this large medical centre for another year. Any success that has been achieved has been due entirely to the support that has been received from a sincere and interested Hospital Board, from the assistance of a loyal and dedicated staff, and from the challenge that forever drives workers in the health fields forward to provide better care for the sick and injured. We go forward into 1964 with confidence, remembering the motto of the R.C.A.F. that has meant so much to so many people over the years—*Per Ardua Ad Astra*—Through Adversity To The Stars.



Recent Aerial View—University of Alberta Hospital

REPORT OF THE BUSINESS ADMINISTRATOR

The following condensed statement of Income and Expenditure provides a comparison with the year 1962 and demonstrates an over-all increase in our 1963 operating costs of \$826,900.00. Of this amount 83% is attributable to an increase in the cost of salaries and wages which, on a proportionate basis, required 72 $\frac{1}{3}$ % from each of our 1963 expenditure dollars.

In the area of fund sources it is significant to note an increase in the charge against the Alberta Hospitalization Benefits Plan of \$875,200.00, a rise of 18.6% over the previous year. This is attributable to the fact that our other revenue sources did not increase proportionately with the increase in expenditures and in fact it must be noted that there has been a falling off of direct revenues from the Federal Government and from off-set revenues derived from preferred accommodation. It is nevertheless gratifying to state that at the time of preparing this report advice has been received which indicates that our full 1963 costs will be met under the Hospitalization Plan and as has been pointed out in previous reports this gratification seems all the more justified when there is a full appreciation of the fact that the University of Alberta Hospital continues to provide, without special financial assistance, services of a kind and nature which are unique to this hospital within the province of Alberta.

Also provided as a part of this report is a statistical summary of personnel movement and position establishment again compared to the previous year.

PERSONNEL MOVEMENT

	Establishment—1963		Separations—1963		
	Full Time	Part Time	Full Time	Temp.	Part Time
Administration	91	10	40	9	1
Nursing Officers & Chg. Nurses }	393	12	25	4	--
Graduate Nurses			253	14	36
Certified Nursing Aides	128	--	61	9	--
Ward Aides	124	--	113	11	--
Nursing Orderlies	86	1	27	6	1
Ward Clerks & Stenos.	28	2	7	4	1
Nurses' Res. & Int. Quarters	27	1	1	2	--
Medical Records	29	2	8	2	--
Medical Directors	1	7	--	--	--
Anaesthesia	4	--	1	--	--
Clin. Lab. & Research	123	32	38	7	2
Inhalation Therapy	4	--	--	--	--
Pharmacy	15	--	2	1	--
Orthopaedics	3	--	--	--	--
Ophthalmology	1	--	--	--	--
Psychiatry	4	--	--	--	--
Rehabilitation	46	--	17	5	1
Medical Social Service	11	--	4	1	--
X-Ray	33	--	10	10	--
Dietary	138	10	95	11	18
Housekeeping	76	--	37	6	--
Janitors & Elevators	47	--	11	2	--
Linen Service	69	--	27	4	--
Maintenance	45	5	7	7	--
	1526	82	784	115	60



MR. C. PEPPLER
Asst. Bus. Administrator



MR. G. C. SHERWOOD
Business Administrator



MR. A. BUYSEN
Superintendent
of Buildings



MR. D. SCHNEIDER
Laundry Manager



MISS N. HAWKINS
Director of
Housekeeping Service



MISS I. TORRINGTON
Director of Dietetics



MR. J. PEDDEN
Personnel Officer



MR. J. D. BEATON
Purchasing Agent



MR. T. HUGHES
Credit Manager



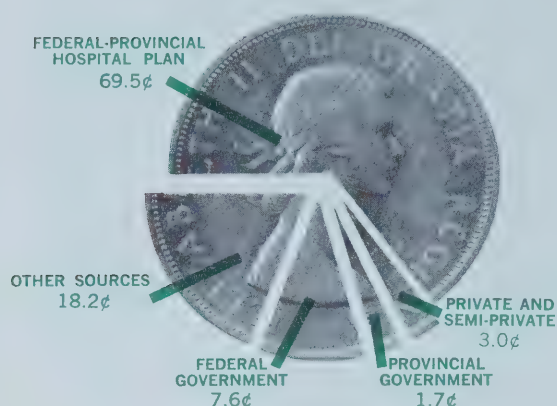
MR. S. WOOD
Accountant



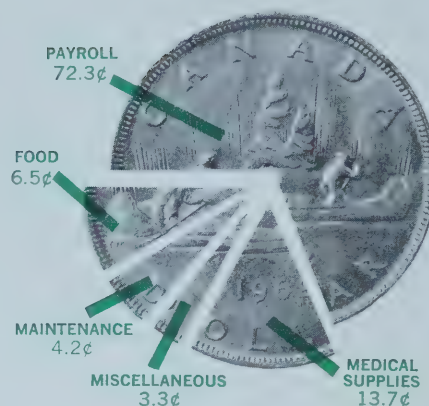
MR. J. R. ELLISON
Comptroller

FINANCES

WHERE OUR DOLLAR COMES FROM



WHERE OUR DOLLAR GOES



OUR MAIN SOURCES OF INCOME

	1963		1962	
	DOLLARS	%	DOLLARS	%
Alberta Hospitalization Benefits Plan	5,561,800.00	69.48	4,686,600.00	65.29
Federal Government on behalf of D.V.A. and D.N.D. patients	606,300.00	7.57	679,500.00	9.47
Private and Semi-Private differentials	245,600.00	3.07	265,000.00	3.69
Provincial Government—direct hospitalization payments	135,800.00	1.70	153,600.00	2.14
Other Sources—W.C.B., Blue Cross, Private Insurance, Non-Residents	1,455,300.00	18.18	1,393,200.00	19.41
	8,004,800.00	100.00	7,177,900.00	100.00

OUR PRINCIPAL EXPENSES

Payroll	5,790,100.00	72.33	5,105,100.00	71.12
Food and Dietary Supplies	516,200.00	6.45	509,000.00	7.09
Medical Supplies	1,097,400.00	13.71	986,300.00	13.74
Plant Maintenance—excluding depreciation	333,900.00	4.17	351,700.00	4.90
All Others	267,200.00	3.34	225,800.00	3.15
	8,004,800.00	100.00	7,177,900.00	100.00

OUR PRINCIPAL ASSETS

Cash on hand and in Bank	127,800.00
Inventories	332,100.00
Accounts Receivable—less provision for doubtful accounts	1,292,080.00
Plant Funds—including land, buildings and equipment	19,613,000.00

CURRENT LIABILITIES

Trade Accounts—Salaries and wages due	298,800.00
Demand Notes and Overdraft	213,800.00

SOURCES OF CAPITAL FUNDS

Province of Alberta	12,992,000.00
University Hospital	1,746,000.00
Federal Government	687,000.00
Federal Provincial Plan	4,350,600.00

A TYPICAL DAY IN THE HOSPITAL
AVERAGE DAILY OCCUPANCY—953 PATIENTS

7	DELIVERIES		PROVINCIAL LABORATORY TESTS (UNITS)	1,170
196	X-RAY EXAMINATIONS		HOSPITAL LABORATORY TESTS (UNITS)	2,622
529	REHABILITATION TREATMENTS		BLOOD TRANSFUSIONS	24
86	EMERGENCY PATIENTS		X-RAY FILMS	704
1,160	PHARMACY SERVICES		ANAESTHETICS	43
47,034	CU. FT. OF WATER		MEALS SERVED COST OF FOOD	4,146 \$1,291
503,397	LBS. OF STEAM		ELECTRIC KW HOURS	25,616
55	OPERATIONS		CENTRAL SUPPLY SERVICES	9,060
1,622 EMPLOYEES 476 STUDENTS 159 MEDICAL STAFF	TOTAL PERSONNEL 2,257		LBS. OF LAUNDRY PROCESSED PER PATIENT	17,518 13.69
UNIVERSITY OF ALBERTA HOSPITAL				572 OUT-PATIENT VISITS
62.8 ADMISSIONS				
		62.9 DISCHARGES		



DR. J. W. MacGREGOR
Chairman—Medical Advisory Board

MEDICAL

DEPARTMENT OF MEDICINE

Director, Dr. D. R. Wilson

Division Heads

Dr. R. S. Fraser—Cardiology
Dr. B. J. Sproule—Chest Disease and
Pulmonary Function
Dr. P. L. Rentiers—Dermatology
Dr. L. E. McLeod—Endocrinology and
Metabolism
Dr. D. R. Wilson—Internal Medicine
Dr. G. Monckton—Neurology

Active Staff

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Dr. Gordon I. Bell
Dr. G. D. Brown
Dr. E. F. Donald
Dr. J. Dvorkin
Dr. A. M. Edwards
Dr. J. Frank Elliott
Dr. R. S. Fraser
Dr. J. A. L. Gilbert
Dr. S. E. Greenhill
Dr. K. A. Hamilton
Dr. F. A. Herbert
Dr. J. R. Hilliard
Dr. E. G. Kidd
Dr. A. S. Little
Dr. L. E. McLeod
Dr. G. Monckton
Dr. P. L. Rentiers
Dr. F. B. Rodman
Dr. R. E. Rossall
Dr. R. W. Sherbaniuk
Dr. B. J. Sproule
Dr. R. K. Thomson
Dr. D. R. Wilson

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Dr. J. W. Scott
Dr. P. H. Sprague

Courtesy Staff

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Dr. A. Cairns
Dr. W. R. St. Clair
Dr. R. H. Whiting
Dr. M. K. Young

Outdoor Staff

Dr. W. A. Mahon

Consulting Staff

Dr. J. A. Aylesworth (Tuberculosis)
Dr. G. H. Ball (Public Health)
Dr. W. J. Downs (Tuberculosis)
Dr. J. C. McPherson (Tuberculosis)
Dr. J. W. Pearce (Physiology)
Dr. F. G. Ramsay (Adm'n—D.V.A.)
Dr. E. S. Orford Smith (Public Health)
Dr. H. H. Stephens (Tuberculosis)

Honorary Staff

Dr. G. R. Davison (Tuberculosis)
Dr. G. M. Little (Public Health)
Dr. A. C. McGugan (Public Health and
Administration)
Dr. R. M. Shaw (Medicine)

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Director, Dr. R. A. L. Macbeth

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Dr. G. K. Morton—Neurosurgery
Dr. J. W. Duggan—Ophthalmology
Dr. O. Rostrup—Orthopaedic Surgery
Dr. K. A. C. Clarke—Otolaryngology
Dr. J. C. Callaghan—Thoracic and
Cardiac Surgery
Dr. J. O. Metcalfe—Urology

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Dr. J. Jimenez
Dr. J. G. Parish

Consulting Staff
Dr. J. R. Fowler

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Director, Dr. J. W. Macgregor

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Dr. T. A. Kasper
Dr. J. W. Macgregor
Dr. T. K. Shnitka
Dr. R. J. Swallow

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Director, Dr. R. E. Bell

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Dr. R. E. Bell—Haematology
Dr. E. J. K. Penikett—Microbiology

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Dr. D. I. Buchanan
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Dr. R. D. Stuart (Bacteriology)

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Dr. S. G. Paletz
Dr. R. T. Williams

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Dr. Zella Hoar

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Director, Dr. H. E. Duggan

Active Staff

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Dr. I. D. Hendin
Dr. C. E. Holmes

Consulting Staff

Dr. R. G. Moffat
Dr. M. E. Tulloh

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Dr. C. G. Duke
Dr. D. G. MacGregor
Dr. H. R. MacLean
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Dr. W. S. Murray
Dr. Mac. G. Strelloff
Dr. A. R. Urschel
Dr. R. S. Van Alstine

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Dr. W. S. Hamilton

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Dr. D. J. Campbell (Biochemistry)
Dr. J. W. Carmichael (Bacteriology)
Dr. H. B. Collier (Biochemistry)
Dr. E. E. Daniel (Pharmacology)
Dr. I. Dyrenfurth (Biochemistry)
Dr. O. E. Z. Morgante (Virology)
Dr. G. Olde (Radioisotopes)
Dr. D. B. Scott (Radiology)
Dr. A. G. Stewart (Biochemistry)

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M. T. S. Parand

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P. C. Racette

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M. Rahimuddin

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J. A. R. Holmes
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M. B. McWilliam
M. A. Shaikh
T. Talibi

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T. F. Klimuk
A. R. MacNeil
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J. R. Miller
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E. Letwin
O. G. Thurston

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S. F. Cox
J. S. Graham
G. E. Green
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W. J. O'Callaghan
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M. Warencia

Senior

Assistant Residents

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J. W. Urschel

Junior

Assistant Residents

P. E. Simonds
W. A. Wilson

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A. M. Tulloch
P. R. Walker
M. R. Welsh

Senior Assistant Residents

A. M. Leacock
J. D. M. Miller

Junior

Assistant Resident

M. T. Scott-Kerr

RADIOLOGY

Resident

L. Costopoulos

Senior

Assistant Residents

H. J. A. Cranz
F. I. Jackson

PATHOLOGY

Resident

B. W. Mielke

Associate Residents

L. A. Dushenski
T. W. D. Miller
M. Sanderson

Senior

Assistant Resident

D. R. Ashford

CLINICAL LABORATORY SERVICES

Resident

S. Petuoglu

Senior

Assistant Resident

J. R. Hill

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R. A. Cumming
G. G. DeYoung
G. W. Drew
M. D. Helde
J. F. Hughes
P. J. Hughes
E. G. King
H. Mandin
B. R. Matas
J. T. Paglia
S. J. Pappelbaum
E. A. Phillipson
H. K. R. Shutt
Z. Wancier

REPORT OF THE MEDICAL SUPERINTENDENT

1963 has been a year of alternating satisfaction and frustration in many of the professional services and departments of the hospital. The Departments of Clinical Laboratory Services and Radiology and the Divisions of Cardiology, Pulmonary Function and Urology have all increased their activities to a marked degree but the continued shortage of beds due to the delay in our renovation program has seriously compromised the work of the Departments of Surgery and Medicine. It is hoped that the difficulties regarding renovations will be resolved in 1964 and that these departments will return to their full complement of beds.



DR. B. SNELL
Medical Superintendent

During 1963, the "ward system" was introduced into the hospital. Under this system, each member of the Medical staff has more control of the admission of his patients to the hospital. He has first call on a number of beds and can admit his patients in order of the degree of their clinical urgency. He knows that when he discharges a patient he will be able to admit another. Emergency admissions are dealt with apart from the ward system. Tied in with the ward system is an arrangement whereby patients may be simultaneously pre-booked for admission and for surgery. This has materially reduced the number of pre-operative days of these patients. Besides placing the responsibility for determining the order of admission of patients where it belongs, the ward system has materially reduced our waiting lists and shortened hospital stay for a number of categories of patients. But for the introduction of this system in 1963, the acute shortage of beds would have constituted an almost unsolvable problem.

In the Department of Clinical Laboratory Services, the increase in volume of work has, to some extent, been offset by automation in clinical chemistry procedures. The introduction of the blood crossmatching service in the hospital has resulted in the number of bottles of blood returned unused being reduced to one-seventh of the previous year's total. This has provided a welcome relief to the Red Cross Blood Transfusion Service which has had difficulty in obtaining enough blood to meet the demands.

The number of patients treated in the Out-patient and Emergency services has increased almost ten per cent over the previous year. The out-patient clinics are now handling over sixty per cent more patient visits than when they were situated in the Alberta Jasper Building and are providing a major teaching facility for undergraduate and graduate training.

Medical Staff

During the year the activities of the committees of the medical staff continued to demand a considerable contribution of time from many members of the staff. However, the continued maintenance of a high standard of professional care has made these contributions worthwhile.

The following appointments to the Medical Staff were made:

Active Staff

J. T. Gibbs	B.A., M.B., B.Ch. (Cambridge), Spec. Cert. Psych. R.C.P. & S. (C)—Psychiatry
F. A. Herbert	M.D., M.Sc. (Manitoba), Dipl. Am. Bd. Int. Med., F.R.C.P. (C)—Internal Medicine
J. Jimenez	B.A., B.Sc., M.D. (Madrid), Spec. Cert. in Phys. Med. & Rehab. R.C.P. & S. (C)—Physical Medicine & Rehabilitation
T. A. Kasper	B.Sc., M.D. (Alberta), Spec. Cert. Path. R.C.P. & S. (C)—Pathology
R. J. Swallow	B.A. (Saskatchewan), M.D. (Alberta), Spec. Cert. Path. R.C.P. & S. (C)—Pathology
R. T. Williams	M.R.C.S., L.R.C.P. (Cardiff), Spec. Cert. Anaesthesia R.C.P. & S. (C)—Anaesthesia

Consulting Staff

G. H. Ball	M.B., Ch.B. (Liverpool), D.P.H. (Liverpool)—Public Health
R. G. Moffat	M.D. (Manitoba), D.M.R.E. (Cambridge), Dipl. Am. Bd. Rad., Cert. Diagnostic & Therapeutic Rad. R.C.P. & S. (C)—Radiology
M. E. Tulloh	M.B., B.S. (Durham), D.M.R.T. (London)—Radiology

Scientific & Research Associates

A. M. Bursewicz	M.B., Ch.B. (Edinburgh), D.P.H. (Toronto)—Bacteriology
J. W. Carmichael	Ph.D. (Harvard)—Bacteriology
O. E. Z. Morgante	M.D. (Rome), M.Sc., Ph.D. (McGill)—Virology

At the end of the year, Dr. J. Winston Duggan, Head of the Division of Ophthalmology, resigned from this position to take up practice in San Jose, California.

Dr. H. F. W. Pribram and Dr. Margaret Thomson also resigned during the year.

I regret to report the deaths during the year of two members of the Medical Staff:

Dr. B. M. Wheeler, Dr. L. P. Mousseau

Over the past few years, the graduate training programs of the University Hospital have become recognized amongst the best in Canada. In 1963, The Royal College of Physicians and Surgeons of Canada awarded 18 Fellowships and 11 Certifications to physicians who had taken part or all of their graduate training in this hospital. This very gratifying achievement reflects credit not only on the candidates for the examinations but also on the medical staff of the hospital who have developed the graduate training in each specialty.

The Women's Auxiliary has continued to contribute a great deal of voluntary work in the hospital under the able co-ordination of Mrs. Jean Rymal. To them and to all other volunteer helpers, we express our sincere thanks.

Details of the highlights of departmental activities during 1963 are included in the Departmental reports which follow.

DEPARTMENT OF MEDICINE

The Ward System was introduced in the Department of Medicine in July 1963 and after a period of "teething difficulties" has been accepted with enthusiasm by all ranks of professional staff. The centralization of professional activity in compact geographic areas has resulted in more efficient utilization of staff time with consequent improvement in patient care. One of the most encouraging results of the Ward System, not entirely foreseen, has been a reduction in the waiting period for patient admission to hospital. This constitutes a real service to the community it serves. The opportunities for teaching at all levels have been greatly improved, but regrettably teaching room facilities still leave a great deal to be desired. The long awaited renovations to ward 43 continue to impose operational limitations on the various medical units.

The out-patient facilities of the Department of Medicine have been expanded by the addition of one general medical clinic and the creation of a hypertension clinic. The implementation of the Ward System and the extension of this principle into the Out-patient Department has made possible continuous long term care of patients by the same staff—a long needed and satisfying advance in patient care. It puts patient-staff relationship on a firm and traditional footing.

The Division of Cardiology continues to grow in many ways. An increase of fifty per cent was experienced in diagnostic service to the province. New techniques for trans septal catheterization of the left side of the heart were established. The year 1963 witnessed the introduction of cardiac pacemakers for the first time, constituting a concrete advance in the treatment of patients afflicted with heart block. The departure of highly trained technicians for greener fields continues to be a discouraging problem, which must be solved if we are to maintain and develop highly complex services. The long term follow-up of patients undergoing cardiac surgery continues and a major report on this work can be anticipated in the near future. New projects relating to the successful operation of artificial heart valves have been initiated. New equipment for restoring normal heart rhythm was introduced during the year and has proven life-saving in patients with serious disturbances in heart action. New cine angiography equipment is in the offing with multiple television screens, which will open up new areas in undergraduate and graduate teaching.

The Pulmonary Division, like Cardiology, has experienced a marked increase in the work load—now double what it was at this time last year. The spreading demand for experienced Inhalation Therapists continues to drain off technical staff as rapidly as they can be trained—a compliment to the competence of this Division, but discouraging because of its chronicity. Two new research projects were initiated in collaboration with the Department of Pathology during the year in the field of pulmonary cytology.

The Division of Neurology and its Neuro-Muscular Research Unit continues its work in collection and correlation of data in patients with muscular dystrophy and related disease.

The Division of Endocrinology has moved ahead in several areas. In the field of thyroid disease, Dr. Fawcett's work has resulted in improvement in the quality of radioactive iodine made available throughout Canada. This, we feel, is an important contribution. The metabolic unit has had its first year of full operation in permanent quarters. Metabolic studies have been carried out in conjunction with the hemodialysis program and a series of complex problems have been studied. Considerable progress has been made in the management of chronic renal disease. Three patients are now being maintained on the Kiil kidney and many problems related to its continued operation are being studied. The results of some of this work were presented at the International Congress of Nephrology in Prague by Dr. L. E. McLeod.

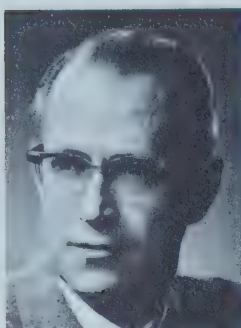


D. R. WILSON, M.D.
Director

DEPARTMENT OF SURGERY

If one were to attempt to capture the dominant mood of the surgical staff during the year 1963, I am sure that it would express itself as a growing concern and irritation over the failure to proceed with the renovation of idle wards within the hospital. The Division of General Surgery has felt this delay most acutely. Prior to the so-called addition to the hospital this division had 107 beds while it now has 89 beds with no immediate prospect of regaining its losses. Admittedly this situation has been instrumental in initiating the introduction of the "ward system" with marked improvement in bed utilization but the latter is now functioning at optimum efficiency and any further improvement in our service to the community must come in the form of the return of the now idle wards. We are badly in need of making additional appointments to our surgical staff in all divisions to maintain a high level of patient care and meet the increasing teaching demands imposed by larger medical classes but this is virtually impossible with the present bed situation. We sincerely believe that the proposed renovations constitute an imperative and urgent need.

DEPARTMENT OF SURGERY



DR. R. A. MACBETH
*Director,
Department of Surgery*

In contrast to the disturbing situation referred to above there was much in 1963 to give the department satisfaction. In the early part of the year we played host first to the Annual Meeting of the Royal College of Physicians and Surgeons of Canada, on the occasion of its first visit to Edmonton, and later to the Annual Meeting of the Canadian Association of Clinical Surgeons, Western Division. Reports would indicate that both meetings were highly successful and can therefore be a source of considerable pride to the hospital.

The Division of Orthopaedic Surgery under the direction of Doctor O. Rostrup recorded 1,684 admissions during the year, a decrease of 4.5% as compared with 1962. During the same period 1,459 operations were carried out and 990 visits were registered at the Orthopaedic Out-patient Clinic.

The Division of Neurosurgery increased its staff to three members during 1963 with the addition of Doctor P. B. R. Allen. Doctor Allen is one of our own graduates who completed his neurosurgical training in the University Hospital and at the Mayo Clinic and it is a privilege to welcome him to our staff. The recent acquisition of a Picker Magna Scanner will doubtless add greatly to our diagnostic neuro-surgical armamentarium through its use in brain scanning. The purchase of a Cryo-surgical unit for the performance of thalamotomy for the relief of Parkinson's disease early in the year resulted in 40 such procedures being carried out as compared with 16 in the preceding year.

The Division of Neurosurgery is particularly pleased to report that the surgical medal of the Royal College of Physicians and Surgeons of Canada has been awarded to Doctor W. J. O'Callaghan.

The Division of Urology recorded an astounding increase in activity in the Cystoscopic Unit during 1963. A total of 4,333 procedures were performed in the unit during this period, an increase of 20 per cent over 1962.

In the Division of Thoracic and Cardiovascular Surgery, the past year has been marked by a tremendous improvement in the surgery of valvular replacement. Using the Starr prosthesis, 39 valve replacements were performed during the year with a mortality of 18 per cent and the first patient in Canada to receive a successful double valve replacement was operated upon in the University Hospital. During the year the division received its new Mayo-Gibbon heart-lung pump and this, along with the provision of an Ethylene Oxide sterilizer in the operating suite, brings our physical facilities for the performance of open heart surgery up to those present anywhere on the continent.

No formal divisional report has been received from the Division of Ophthalmology this year as the result of the resignation of the Chief of that Division, Doctor J. W. Duggan, to take up practice in California. Doctor Duggan's happy personality and skill as an ophthalmic surgeon will be sorely missed by the department, a fact that becomes increasingly obvious as we search for a successor. The Glaucoma Diagnostic Clinic, under the Direction of Doctor T. A. S. Boyd, continued to expand its patient service and research functions throughout the year. The total number of patients attending the clinic, usually for multiple visits, amounted to 770, an increase of almost 35 per cent as compared with 1962.

The Division of Otolaryngology under Doctor K. A. C. Clarke again reports a very active year. Increasing service has been rendered in the pre-school Deaf Clinic which was first opened last year and an increasing number of microsurgical procedures have been carried out by Doctor P. T. Quinlan in this division.

The Division of General Surgery, while probably bearing a less glamorous public image than the surgical specialities continues to be the back bone and work horse of the patient care and teaching arm of the Department. The general surgical Out-patient Clinic too continues to grow under the capable direction of our two teaching fellows. Within the Division of General Surgery, the Peripheral Vascular Clinic continues to offer a valuable service to the people of this province. Attendance figures continue to be essentially similar to previous years with 83 new patients attending and 258 follow-up visits. Active interest in the Chemotherapy Evaluation Program has continued although this area, now established, is gradually being taken over as a public service by the Cancer Diagnostic Services of the provincial government.

The intensive study course in general surgery, originated two years ago by Doctor H. T. G. Williams, in order to assist members of our graduate training program in their preparation for the qualifying examinations of the Royal College of Physicians and Surgeons of Canada has continued on a twice weekly basis and is extremely well accepted. The overall supervision of our graduate training program, for which an ever increasing number of applicants are received, continues under the capable direction of Doctor R. C. Harrison.

It is a privilege at this time to again record the indebtedness of the entire department to our hard working committee on surgical infections composed of Doctor T. S. Wilson and Doctor R. D. Stuart. Their constant vigilance has done much to maintain our enviable record with respect to surgical infections.

No attempt has been made in this report to record the main specific contributions of the individual members of the department throughout the year. Their activity is, however, attested to by the 36 papers published in scientific journals, the 116 papers presented at various scientific meetings and the \$198,850.41 which they received from various granting bodies to support the 49 research projects under active investigation within the department during the past year.

DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

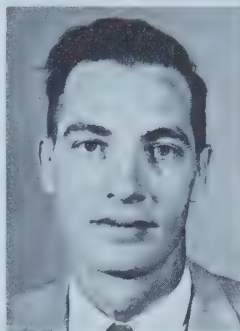
The activities of our department are appended to this report in table form for convenience. It will be noted that there was an increase in activity in the Gynaecology Service both in admissions and operative procedures. For practical purposes, the Obstetric Service's activity has remained the same. A portion of our Obstetrical Service on Station 64 was designated for the use of "fast" turn-over beds on the Gynaecology Service. This has worked to our satisfaction, in that our Gynaecology waiting list was significantly reduced because of the use of these beds. Their use is made possible by the fact that our obstetric accommodation increased abruptly without an increase in size of the practising staff. It must be noted, however, that within the next twelve months, three new members will be added to the staff.

Last year saw the opening of our departmental laboratory on the sixth floor of the Clinical Services Wing. With these facilities, a clinical study on the chemistry of amniotic fluid was completed, and a new project, involving the study of electrical activity of uterine muscle was instituted and is presently under way.

Our staff continue to be responsible for the instruction of undergraduates in their third year. The entire class is instructed in this hospital by this group. Presently instituted is a system of tutors, in which individual students have continuing staff supervision throughout the year.

Dr. William Taylor continues to undertake a major responsibility in the supervision of our Nurseries, and we gratefully acknowledge our appreciation.

During the past year, we have felt acutely the need of isolation facilities for our Nurseries. These are planned for Station 64 and will be a welcome addition. At the present time, we do not have the facilities for isolating premature babies, or any infection in this unit, and this poses a real problem at the moment.



WILLIAM M. PAUL, M.D.
Director

OBSTETRICS

Year	Admissions	Deliveries	Total Babies	Multiple Births
1961	2490	2211	2241	30 pr. twins
1962	2588	2342	2362	20 pr. twins
1963	2559	2324	2352	28 pr. twins

OBSTETRICS

1963

Total Deliveries	-----	2324
Residence		
Urban	-----	1974
Rural	-----	350
Parity		
Primigravida	---	629
Multipara	-----	1695

OBSTETRICS

1963

Total Babies	-----	2352
Vaginal Deliveries	-----	2225
Abdominal Deliveries	-----	127

GYNAECOLOGY

Year	Admissions	Surgery
1961	1726	1675
1962	1651	1600
1963	1892	1744

OUT PATIENT DEPARTMENT

	1961	1962	1963
Obstetrics			
Prenatal clinic visits	1879	1955	1893
Admissions	322	342	364
Deliveries	249	263	261
Gynaecology			
Clinic visits	692	1124	1406
Admissions	148	159	184

PRENATAL CLASSES

	1961	1962	1963
Total Registrations	187	255	213

DEPARTMENT OF PSYCHIATRY

The total number of in-patients treated in the Department during the year was 935, approximately the same as the two previous years. In the Out-patient Department there were 849 investigative and treatment interviews.

The Unit for Emotionally Disturbed Children, under the direction of Dr. Andrew N. McTaggart, cared for a total of 100 patients. The average length of stay of in-patients was 18.8 days (1962—21.7). In the Out-patient Service associated with this unit there were 138 children seen in consultation.



K. A. YONGE, M.D.
Director

Through the psychological services a total of 445 patients underwent tests by psychologists—this compares with 398 patients in 1962.

There has been a considerable increase during the year in the research activity in our Department. Those chiefly involved have been Dr. T. E. Weckowicz, Dr. J. T. Gibbs, Dr. J. A. Easterbrook and Dr. R. Craddock. Four graduate students from the Department of Psychology have been involved in this work part-time.

The teaching of medical students has again ranked as a major activity of this Department. Second year students are engaged in the Department in the practice of medical interviewing, under supervision. Clinics on the diagnosis and treatment of psychiatric conditions are held in the Department for Third year students. The Fourth year students rotate through the Department as clinical clerks.

Our Graduate Training Program has this year undergone major revision and the Seminar Program has been considerably extended. Graduate staff of both the Provincial Mental Hospitals have this year, for the first time, availed themselves of the opportunity to attend the Seminar courses. Of our graduate students the one candidate who was eligible for the Specialist Examination of the Royal College of Physicians and Surgeons of Canada successfully passed.

The nursing staff on which the success of psychiatric care in hospital so much depends are to be heartily commended for their devoted and skilful service.

DEPARTMENT OF PAEDIATRICS

Statistics for in-patient care include 3,500 admissions, and average length of stay 10.35 days. Figures for average length of stay include long-term care patients on Station 24 and the emotionally disturbed children on Station 23. Pre-booking by the surgical staff has materially reduced the length of time a child is in hospital prior to operation.



J. K. MARTIN, M.D.
Director

An area that is lacking in this hospital is an adolescent ward. This is needed for improved teaching, research and patient care. Probably some twenty beds would suffice in a single unit and adolescents with certain emotional problems and physical ailments would be admitted. Reviewing the future needs for paediatric beds, assuming this hospital remains the centre of teaching and research, it is my opinion that some 200-300 beds (including adolescents) will be required. The time has arrived for this proposal to be discussed and, if accepted, plans should be made.

Service provided in Paediatric Out-patients continued to increase. A total of 4,146 patient visits reflected an increase of 500 over 1962. New patients numbered 772 and 315 were admitted to hospital. Paediatric out-patient clinics were increased to three half-day sessions per week. Specialty clinics supervised by the Department of Paediatrics or in collaboration with other departments include neurology, respiratory, cardiac, adolescent and emotionally disturbed, pre-school deaf, cleft palate and amputees. Well-baby care is provided in association with post-natal follow-up. All the above services provide a very essential facility for undergraduate and resident training. They reflect the changing patterns of practice away from acute disease to preventive care and handling emotional and mental problems. They also provide a more representative picture of the type of problems more commonly encountered in practice. In the future the emphasis on clinical training will, I am sure, be orientated more and more in this direction rather than in in-patient ward teaching. Facilities in the Out-patient Department require expansion. It is to be hoped that in the near future day-care patient programs will be developed, thus easing pressure on hospital beds, avoiding the emotional problems of hospital admission and providing a far less costly service.

The Paediatric Resident Staff provided a 24-hour information service under the Provincial Government's Poison Control Program. A group of consultants are available if the resident cannot provide the information sought. During the year there were 288 enquiries.

Three teachers have worked in the hospital under the supervision of the City of Edmonton School Board. Twenty-seven patients have been registered in the senior grades since September.

Volunteer help totalled 5,272 hours. Teenagers have made a big contribution in time to this program.

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION

In January, the Rehabilitation Department was privileged to present a television program for the edification of the Fellows of the Royal College of Physicians and Surgeons of Canada, whose annual meeting was in Edmonton. The program consisted of a tragedy in eight acts entitled "The Hazards of Bed Rest". Nearly all the members of the department and a number of the patients were involved in this production, and it appeared to be received well by the audience.

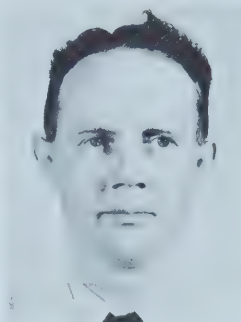
The Electromyography section of the Rehabilitation Department has grown from a unit where four years ago one or two examinations were made each month, to a busy section where three or four examinations are made each day and there is a continuous research program.

In May 1963, Dr. Manuel Tascon-Alonzo received a Master of Science degree from the University of Alberta for his thesis on Electromyography, which is the first thesis to be completed in the Rehabilitation Department, and is the first on Electromyography at the University.

For two years, a program of primary prevention of home accidents has been directed toward mothers attending postnatal classes in the Department. To effect this, an exhibit has been made to demonstrate ways of preventing home accidents and lectures are given on the exhibit by the Chief Occupational Therapist, Miss McNeice. A second exhibit on Accident Prevention was made with a grant from the Polio Foundation and was shown at the 9th World Congress of the International Society for the Rehabilitation of the Disabled in Copenhagen, Denmark.

A grant from the Polio Foundation Research Trust enabled us to have a time and motion study done on the Rehabilitation Department and Ward 66 by the Department of Psychology of the University of Alberta. A copy of the report on this study has been submitted to the Administration.

The opening up of new facilities, e.g., Glenrose Hospital and competitive salaries offered by such institutions, has resulted in a severe shortage of staff in both physiotherapy and occupational therapy. At one time in the fall only half the establishment for physiotherapists and occupational therapists was working in the department.



M. T. F. CARPENDALE, M.D.
*Director—Physical
Medicine & Rehabilitation*

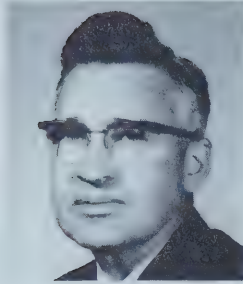
STATISTICS—

Physio and Hydro	1963	1962
Total number of treatments given -----	87,286	94,560
Total number of patients treated -----	5,901	6,970
Total number of Polio treatments given --	3,115	7,456
Total monthly average of Polio patients treated -----	17.6	26.4
Remedial Exercise Section		
Total number of treatments given -----	24,825	23,622
Total number of patients treated -----	3,644	3,115
Occupational Therapy Section		
Total number of treatments given -----	18,765	19,542
Total number of patients treated -----	2,354	2,548
Combined Totals		
Total number of treatments given -----	133,991	145,180
Total number of patients treated -----	11,899	12,633

There has been approximately a 10% decrease in overall patient treatment. This is mainly in the physio and occupational therapy sections, and reflects the decrease in numbers of staff in the fall of 1963. It is compensated for slightly by an increase in the number of patients in the remedial exercise section. Polio treatments are now less than half what they were in 1962, and it is now a minor problem in the overall program of the department.

DEPARTMENT OF ANAESTHESIA

There has been a slight increase in work done in terms of numbers of cases as seen in the accompanying table.



E. A. GAIN, M. D.
Director,
Department of Anaesthesia

	1961	1962	1963	Increase over 1962
Total Anaesthetics Administered -----	9522	9746	10798	+1052
Elective -----	8131	8286	9151	+865
Emergent -----	1391	1460	1647	+187
Average Anaes. time --	80.2	78.0	75.6	-2.4 minutes

Our graduate training program continues to be very satisfactory with a full quota during the 1963 year and the same exists for 1964. It has been necessary to turn down many applications, a change from past years.

DEPARTMENT OF RADIOLOGY



H. E. DUGGAN, M.D.
Director,
Department of Radiology

	1961	1962	1963
Number of Radiographic Examinations	41,514	46,572	47,840
Number of X-Ray Films Used -----	132,900	153,075	176,100
Films Per Examination -----	3.2	3.3	3.7
Number of Fluoroscopic Examinations --	4,355	4,651	4,867
X-Ray Therapy -----	1,104	1,974	2,244

There has been a slight increase in the number of patients examined in the diagnostic section of the Department of Radiology as compared to the year 1962. The number of special examinations being done, however, is considerably increased and partly accounts for the increase in number of X-Ray films used.

Radiologists who joined the Department during the year were Dr. W. R. Parker on January 15; Dr. J. D. R. Miller, October 1; and Dr. Lillian Hsu, November 18.

A new Picker Magna Scanner has been purchased for the Department of Radiology and Isotope Laboratory. This will allow scintiscanning to be done on other organs than the thyroid gland including the brain, kidneys, liver, spleen and pancreas.

DEPARTMENT OF CLINICAL LABORATORY SERVICES

A review of the work of the department in the past year shows further substantial increases in the work in almost all areas. This follows the trend of the past ten years as shown on the attached graph. During this whole ten year period the growth has averaged approximately 30,000 tests per year and projection of this growth figure over the next five years suggests that by 1969, the volume of hematology and chemistry tests will probably reach about 600,000 per year or about 50 per cent above the present load.

In the division of clinical chemistry, where the greatest increase in the volume of work and in introduction of new procedures takes place, continued attention is constantly being paid to automation and improvements in techniques. While some older procedures have been discontinued, they do not balance the number of new tests introduced. At the year's end, seven analytical procedures were being done by automated methods, accounting for about 32 percent of the total chemistry tests done, exclusive of urinalysis. A multi-channel analyser for electrolyte analyses has been purchased and when set up, will increase this to about 58 per cent. There is, nevertheless, a very large volume of work which is so individual or complex that it will never be suited to automation.



R. E. BELL, M.D.
*Director—Department of
Clinical Laboratories*

The major development in the division of hematology has been the introduction of blood crossmatching under the direction of Dr. D. I. Buchanan. This has greatly improved blood transfusion service in the hospital and has greatly reduced the amount of blood that was previously wasted owing to the problem of transport from the Red Cross Depot. The number of bottles of blood returned to the Red Cross Depot has dropped from 3,401 bottles (32 per cent of the blood received) for ten months of 1962 to 496 (6.5 per cent of the blood received) for this period in 1963. This represents a very major saving in blood which would otherwise be wasted. Dr. Buchanan has also continued his special studies on transfusion problems, particularly those related to open heart surgery, with assistance from the Medical Research Council.

In order to obtain better information on the work of the laboratory for both medical and administrative purposes, a system of data processing using an IBM punch card system was started during the year. The work of the blood bank and clinical chemistry has now been programmed and cards are being punched for all the work in these areas. In the coming year, the work in hematology and radioisotopes will also be programmed into this system. Through the facilities of the computing centre at the University of Alberta, detailed analysis of many aspects of the laboratory work will be possible.

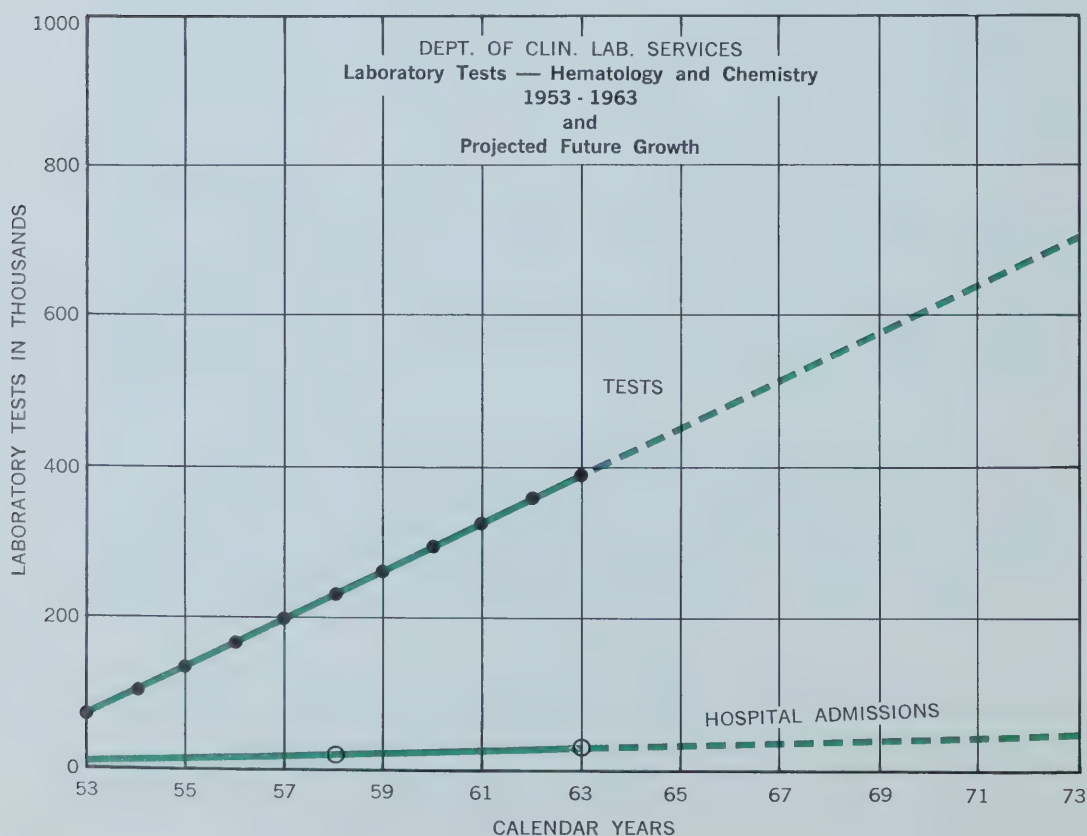
Great difficulty was encountered during the year in staffing the laboratory. This was partly due to the extended services, particularly blood banking and 24 hour coverage, which aggravated the shortage of junior personnel. There is also a serious lack of qualified senior technical help. Training programs at both junior and senior levels are being developed to remedy this chronic staffing problem. Conservation of staff by automation and improvement in procedures may also help remedy this to some degree. Salary scales more competitive with other parts of Canada are also necessary, particularly in the more senior categories of technical staff.

In conjunction with the other hospitals in the city, a course to provide the first year of laboratory instruction in medical technology was established at the new Northern Alberta Institute of Technology. First year students from the University Hospital medical technology program have been at the Institute since September and will start their year of in-hospital training in the summer of 1964. This new program is expected to improve considerably the quality of their training and has made it possible to increase the number of first year students to fifteen.

DEPARTMENT OF CLINICAL LABORATORY SERVICES

	1962			1963	
	Tests	Units		Tests	Units
Clinical chemistry -----	91,417	400,426	Blood and other chem.	121,906	399,389
Urinalysis -----	54,746	83,557	Urine chem.	56,134	117,735
Total chemistry -----	146,163	483,983		178,040	517,124
Hematology -----	204,447	296,618		216,915	315,177
Blood bank -----	--	--		18,427	98,227
E.C.G.'s -----	7,302	29,208		8,427	33,788
E.E.G.'s -----	2,315	27,780		2,512	30,144
B.M.R.'s -----	292	1,168		164	656
Miscellaneous -----	1,876	1,963		1,973	2,040
TOTAL -----	362,395*	840,720		426,458*	997,156
Radioisotope Laboratory					
Total Diagnostic Procedures --	2,932			2,816	
Bacteriology and Serology					
Provincial Laboratory (units) -		329,080			344,441
Red Cross					
Patients Transfused -----	2,885			2,837	
Bottles Used -----	8,252			8,770	

*These figures include *56,404 and *78,721 tests done on out-patients.



DEPARTMENT OF PATHOLOGY

The work of the members of this department is made up of service responsibilities (Surgical and Autopsy Pathology); teaching and research in these areas have been active during the past year.

The tissues removed at surgery and reported upon numbered over 7,200, an increase of about 500 over the previous year. Many of the cases are complex, requiring the study of many tissue sections, so that the total number of slides examined by microscope were 12,629.

The service in Cytology continues to be active. In previous years Cytology was largely confined to the examination of cervical smears, but the service has been extended to include examination of sputum, bronchial washings and gastric washings. The service in Cytology continues to disclose cases of unsuspected cancer of the cervix in the pre-invasive curable stage.

During the year 400 autopsies were performed. This was 67.6% of the total deaths occurring within the hospital during the year. The autopsy rate is slightly lower than in previous years, but is still well above the percentage required for accreditation.

Research activities are increasing from year to year and this is reflected in the number of papers published by members of this department.



DR. J. W. MACGREGOR
Director
Department of Pathology

OUT-PATIENT AND EMERGENCY DEPARTMENT

Out-patient Department

The total visits to the Out-patient Department during 1963 increased from a level of 23,133 in 1962 to 25,493 in 1963. This represents almost exactly a ten per cent increase in total visits and based on the number of patients treated at the clinic, amounts to approximately 4.5 visits per annum per patient treated. The increase in the number of patients admitted to the University Hospital speaks well for the type of care given in the out-patient clinic. The number of prescriptions filled in relation to the number of visits made is slightly down this year and may reflect the attempt to curtail the re-filling of prescriptions over protracted periods of time.

Emergency Department

The Emergency Department has also shared in the general growth showing an increase in total number of patients from 30,289 in 1962 to 32,366 in 1963. This represents an increase of 8.5 per cent in the total number of patients seen. There has been an increase in the number of admissions from 3,032 in 1962 to 3,197 in 1963. During 1962 we were admitting about 10 per cent of the patients who came to the Emergency Department. This has decreased slightly in 1963 due to more rigid criteria for emergency admissions.

SUMMARY OF ANNUAL REPORTS O.P.D. & EMERGENCY DEPARTMENTS

Out-patient Department

	1962	1963
Total Visits -----	23,133	25,493
Total New Patients -----	2,578	2,466
Total Patients Treated -----	5,477	5,669
Patients Admitted to Hospital ---	1,683	1,779

Emergency Department

Total Visits -----	30,289	32,858
Total New Patients -----	21,038	23,604
Admissions -----	3,032	3,487
Staff Treated -----	1,011	837
Total Value of Year's Work -----	\$77,676.75	\$87,275.45

Plaster Room

In-Patients -----	489
Out-Patients -----	2,257



A. S. LITTLE, M.D.
Director — Out-Patient &
Emergency Department

DEPARTMENT OF DENTISTRY



H. R. MacLEAN, D.D.S.
Director,
Dept. of Dentistry

During 1963, the Department of Dentistry has expanded its services to those patients who cannot be treated in the dentist's office.

Total patient visits in all areas	784
Total number of patients treated under general anaesthesia in the Operating Room	88
Total number of Oral surgery cases under local anaesthetic in the Dental Department	92

Dr. Castaldi is presently engaged in a research project entitled "The Study of Tooth Eruption in Children From Infancy to Three Years".

SPECIAL SERVICES AND RESEARCH COMMITTEE

The year has been partly one of consolidation of special services supported by the committee and partly of fostering the development of new services. The pace of these developments has slowed somewhat largely owing to lack of space where they can be undertaken.



W. C. MacKENZIE, M.D.
Chairman — Special Services
& Research Committee

The unit for treatment of chronic renal disease by intermittent hemodialysis under Dr. L. E. McLeod has been organized into a smoothly functioning unit carrying out dialysis on patients several times weekly in a routine way. The effects of this treatment are being carefully followed and research data acquired on which future improvements in this technique will depend.

The investigation of glaucoma has continued and research that is being done in the glaucoma unit by Dr. T. A. S. Boyd has been reported at scientific meetings in Canada and the United States. The number of patients attending the clinic for medical investigation or follow-up numbered 770.

The medical electronics and engineering unit has been in operation slightly over two years. During the past year, arrangements were made for supervision of the electronic work in the unit by the senior staff of the electronics shop at the University of Alberta. This has made available to the hospital staff a wide range of special skills and expert consultation in electronics. An important educational function is being provided by the unit in helping to develop among the medical staff research fellows, and technicians, a greater awareness of what the science of electronics can do in simplifying work and making possible new measurements or procedures useful in diagnosis or research. Also the staff at all levels have been able to learn a great deal more concerning the principles of operation of the apparatus they are using.

Support was provided Dr. J. C. Callaghan for the introduction of an improved method of treatment of the respiratory distress syndrome which is a major cause of death in newborn infants. This technique of treatment is in its formal stages of validation in the laboratory and will probably be available for use on patients in the near future.

Support was also provided Dr. W. H. Lakey for introduction of a new method of treatment of patients with paralysis of the bladder. This technique will involve applying an electrical stimulus to this organ by means of an electronic device operating through electrodes inserted into the bladder muscle. If successful, this will be of great benefit to paraplegics and other patients with this condition.

The committee cleared 22 new or continuing applications being made for support of research or special service for 1964. These include applications to the Medical Research Council, National Health grants, Alberta Heart Foundation and others.

The support received from these same sources for work being carried out in the present year amounted to over \$100,000.00.

The committee provided financial assistance for several exhibits which were shown at medical meetings in Canada and the United States. These exhibits illustrate the special types of medical service and research being done in the hospital. They have had a noteworthy effect in making the members of the medical profession and lay public more aware of the special role the University Hospital is playing in providing the highest standard of medical care.

Development of new services will require additional space and while the committee have received a great deal of consideration from the hospital administration in this respect, there is little available. It is hoped that this can be remedied in the near future to enable the hospital to continue to keep pace with the advances being made in medical care.

REPORT OF THE DIRECTOR OF NURSING

The year 1963 was notable in nursing circles in the University Hospital and in the Province of Alberta as a whole. On the provincial scene two significant reports which should have a far reaching influence on the future of nursing were released. They were the Report of the Nursing Education Survey Committee (Scarlett Report) and the Survey of Schools of Nursing in the Province of Alberta (Somerville Report). The recommendations made in these important documents, if followed, will lead to major changes in the pattern of nursing education and nursing service.

In the hospital Miss M. Geneva Purcell completed her first full year as Director of Nursing, and the enthusiasm with which she carried out her important duties indicated that the predictions made in the 1962 report with regard to her service to the University Hospital were correct. Under her guidance new philosophies have been developed in nursing education and nursing service, and these have been put into practice. Her leadership has had a stimulating effect throughout the nursing staff and has produced a continuing drive that will result in increasingly attentive care to patients now and in the future.

Miss Purcell's report on the activities of the Nursing Division of the hospital follows.

It is my pleasure to present the annual report for the Department of Nursing for the year 1963. In preparing this report one can reflect on the following statement, "Every hospital nursing service has the responsibility for determining its philosophy and objectives. Its practitioners must be aware of the goals set by the service and continuous inservice education programmes may be required to make possible their achievement. Its responsibility for stating its philosophy, aims and objectives should not be altered because it provides a practice field for schools of nursing. Rather, it must make known its goals to those who use the service for practice."

Mary E. Brackett



MISS M. GENEVA
PURCELL

Director of Nursing

Nursing Service

This year's activities have centered around improvements in nursing service. Through the co-operative efforts of the University Hospital Board, Hospital Administration, and the Medical Team, professional training and experience has been provided in various ways.

Six nursing officers have attended educational institutes sponsored by the American Hospital Association.

Eighteen members of the charge nurse personnel completed a course in Ward Teaching and Supervision provided by the School of Nursing, University of Alberta.

Five nursing officers, two charge nurses and five general duty graduates were granted leave of absence to attend University for further study.

A full time nursing officer was employed to direct the orientation programme and conduct an in-service educational programme for nurses.

The Nursing Survey Team has completed a study of several areas in the hospital. As a result the following has been accomplished:

- (1) The philosophy, aims and objectives of Nursing Service have been stated.
- (2) A Co-ordination of Patient Care Committee was formed to co-ordinate patient services throughout the hospital.
- (3) Job descriptions for all levels of personnel have been completed.
- (4) Ward routines have been prepared.
- (5) Patient care plans are being studied and revised.



MISS M. J. LEES
*Associate Director—
Nursing Service*



MR. R. COOMBS
*Associate Director—
Surgical Nursing
Service*



MRS. E. MACKLAM
Nurse Co-ordinator
Nursing Reserve

Staffing Pattern

Nursing staffing has been somewhat more stable, although as usual the summer months were gravely understaffed. A comparative study of staffing follows:

	1961	1962	1963
Nursing Officers	45	47	50
Charge Nurses	49	50	51
Assistant Charge Nurses	27	28	33
General Duty			
Full time	223	224	259
Part Time	9	12	11
Certified Nursing Aides	98	102	111
O.R. Assistants	10	15	17
Ward Aides	117	121	124
Ward Clerks	27	21	22
Orderlies	85	88	89

Resignations

	1961 Not known	1962	1963
Nursing Officers		5 - 10.6%	3 - 6 %
Charge Nurses		13 - 26 %	15 - 29.4%
Assistant Charge Nurses ..		7 - 25.3%	13 - 39.3%
General Duty		203 - 90.6%	281 - 85 %

The vacancies created in charge nurse and assistant charge nurse categories were filled by promotion from nursing personnel staff.

The Nursing Reserve have continued to assist in meeting nursing service needs at peak loads of activity. There are sixty-eight active members of the Nursing Reserve. Fifty-eight have provided 2530 hours of nursing service from March 31 to December 31. This can be equated to equal eleven full-time graduates, general duty personnel.

3 Nursing Reserve members have returned to full time duty;

3 have returned to full time on a periodic basis;

1 enrolled in the School of Nursing, University of Alberta for further study;

1 member has been employed away from the hospital.

The second program for the Nursing Reserve began in November. Fifty-four members have registered.

The Director of Nursing Contingency Fund was established in January by the University Hospital Board. Its purpose is to provide financial loans for the graduands of the University Hospital to become established in the community if returning to the general duty staff of the hospital. Seven young graduands received assistance from this fund.

The Operating Room, the Central Supply, and the Emergency Department were placed under Mr. Ralph Coombs who was appointed Associate Director of Surgical Nursing Service in January.

For the first time, six medical students were employed during the months from May to September as operating room assistants to provide summer relief. This proved to be most satisfactory.

Nursing Education

The Nursing Education Survey Team appointed by the Committee on Nursing Education, University of Alberta, visited the school of Nursing in June.

The School Improvement Program Workshop sponsored by the Canadian Nurses' Association was held in the Nurses' Residence during October.

The affiliation contracts between the University Hospital School of Nursing and the University of Alberta School of Nursing, and the contract between the University Hospital School of Nursing and the Royal Alexandra Hospital have been reviewed and revised.

The Nursing School library increased the book holdings by one hundred and seventy-eight books representing eighty-eight titles. Loss of books under the new system of control was ten copies—a reduction of ninety books for a saving of \$1035. The average monthly circulation is 555.66 books. Ninety-eight out-dated books were discarded.



MRS. B. ELLIOTT
President,
Nursing Reserve



MISS M. R. THOMPSON
Associate Director—
Nursing Education

A generous gift of money to the Agnes Macleod Memorial Library for books was received from Class 1942 and B.Sc. 1943 at the time of their reunion.

The nursing students have had an opportunity to participate in the following:

Varsity Guest Weekend

The Annual meeting of the Student Nurses' Association held in Jasper in conjunction with the Alberta Association of Registered Nurses

The activities of the Student Nurses' Association of Alberta:

The students were hosts to thirty-five nursing students from the University of Saskatchewan School of Nursing.

The University of Alberta Hospital debating group won the Jeanie Clark cup this year.

Graduation Exercises were held—

April 1	—	29	graduating plus 4 P.M.H. affiliates
October 22	—	79	graduating
Total	—	108	

There was one failure in the conjoint examinations.

Class Withdrawals — 15

Reasons for withdrawal:

To be married	6
Health	4
Failure to meet standards	3
Other	2

The attrition rate was 14.4%.

The Admissions Committee reports and records comparative figures for the past two years:

	1962	1963
January Class	36	46
September Class	93	102
Total	129	148
Enquiries for calendar	595	559
Requests for application	380	500
Applications received	229	340
Applications accepted	129	148
Students reinstated	2	1
Applications rejected	4	17
Medical reasons	3	4
Academic reasons	1	9
Applications withdrawn	96	160
Unsuited for Nursing	--	4

Reasons for withdrawal of applications:

	1962	1963
Health	--	1
Marriage	--	2
Change of Plans	10	13
To enroll in other schools	21	18
To enroll in other University faculties	18	18
No further communication	29	70
Not academically eligible	10	38
Other reasons	8	--
	96	160

Twenty-five students withdrew from the School during the year. The total enrolment as at December 31 stands at three hundred and fifty.

It is with deep regret I report the tragic death of Miss Merrilyn Nicholson, Class January 1964. Miss Nicholson was instantly killed in a car accident on June 2.

The forty-four hour week schedule was established for all nursing students.

The students' clinical experience in the Operating Room, Recovery Room, the Central Supply and Emergency has been designed to be given in a twelve week block. This was organized to facilitate a more effective master plan rotation.

The nursing students from the Archer Memorial Hospital, Lamont, received affiliation in Paediatric Nursing.

The nursing students from the Royal Alexandra Hospital received affiliation in the Out-Patient Department.

Graduate students from the University of Alberta and the University of Saskatchewan have had field experience in the following areas:

- (1) Obstetrics, including Premature Nursery
- (2) General educational program
- (3) Clinical teaching in the Specialties

The Student Health Service reports the following:

Physical examinations	817
Students on sick parade	1727
Number of hospitalized days	699
Number of days lost due to illness	1235
Total number of days lost	1934

There were 114 applications for financial assistance:

Blue Cross and Commercial Travellers Bursaries	41
Shaw Memorial Fund	8
Revolving Loan Fund	21
Student Assistance Act	44

The Advisory Board has held five executive meetings and two regular meetings.

The Advisory Board has approved nursing students to marry in the second and third year of their programme, and married women requesting to enroll in the programme shall be considered on an individual basis. It is further approved that nursing students, in the event of pregnancy, be granted maternity leave-of-absence.

The Nurses' Residence

A new switchboard was installed in the residence and the telephone service improved.

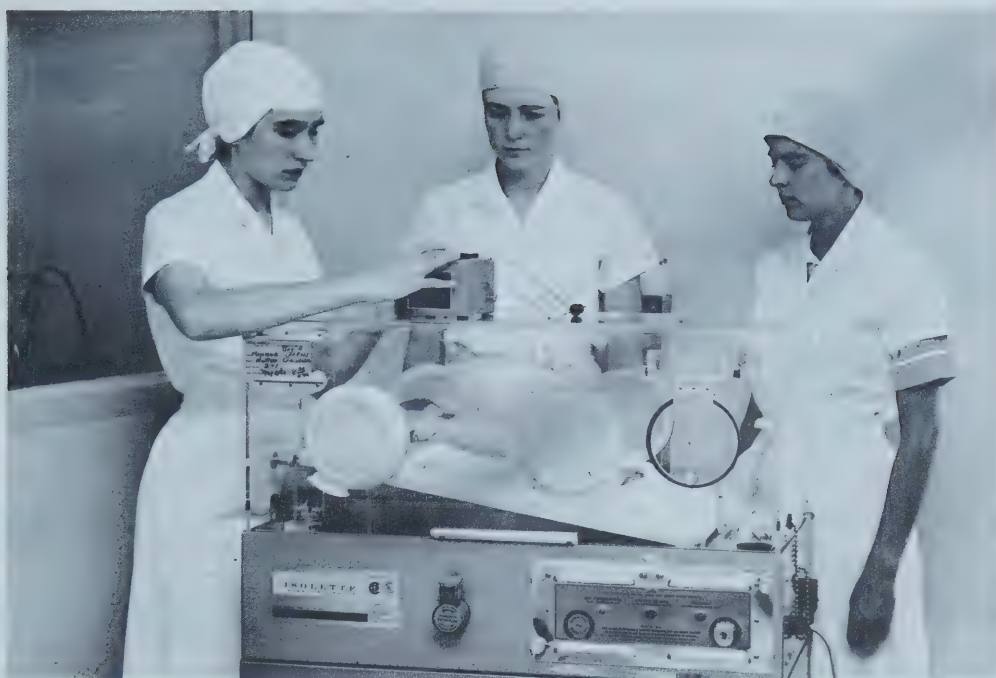
The shampoo room was completed.

Five commercial automatic washers were installed in the laundry room.

Comfortable lounge chairs were provided for all single rooms in the residence.

An electric range was installed in the kitchenette.

In conclusion may I, on behalf of the Nursing Department, express our appreciation to those persons and groups who have co-operated with and participated in the activities recorded herein.



DEPARTMENT OF PHARMACY

The tender system continues to be used in procuring of quality drugs from major pharmaceutical firms and it is to be noted that there has been a greater utilization of drugs for the past year.

In order to alleviate the work load of each individual pharmacist and permit this department to meet its heavy demands we have greatly expanded the manufacturing and prepackaging of drugs in the past year.

The teaching of Pharmacology to Nursing Students and presentation of Laboratories at the University to pharmacy students has been carried out as in the past. Practical instructions and the presentation of lectures in Hospital Pharmacy has been undertaken by our department to students in their fourth year at the University.

The delivery of Narcotics and Schedule G drugs to each nursing station by a pharmacist by means of a mobile cart has saved a great deal of nursing time. This system is functioning very satisfactorily and it is believed that delivery of other pharmaceutical supplies could be considered once adequate staff and uniform organization of nursing stations could be established.



W. W. MADAY, B.Sc.
Director of
Pharmaceutical Services

Statistics	1960	1961	1962	1963
Cost of Drugs	\$223,857	\$182,708	\$144,529	\$152,694
Stock Inventory	\$ 88,469	\$ 93,538	\$ 91,394	\$ 91,394
Prescriptions:				
—Total	143,216	132,244	166,683	189,498
—Daily Average	688	570	815	970
Drug Costs By Area				
Operating Rooms	\$ 30,517	\$ 33,809	\$ 41,302	\$ 45,670
Laboratories	\$ 17,438	\$ 22,360	\$ 21,654	\$ 20,001
Out-patient Department	\$ 18,762	\$ 27,600	\$ 35,008	\$ 34,649
Emergency	\$ 6,671	\$ 6,984	\$ 6,567	\$ 8,604

HOSPITAL CHAPLAINCY SERVICE

The Hospital Chaplaincy Service has continued to expand during its second year of operation and has become a valued part of our patient care resources.



REV. R. K. DOUGAN
Hospital Chaplain

	1963	(1962)
Number of Patients Visited	709	(376)
Number of Contacts with Patients	1,574	(766)
Interdenominational Chapel Services	35	(23)
Meetings of Church, Community and Professional Groups Attended by Chaplain	139	(119)
Consultation Interviews with Doctors, Nurses, Ministers, Other Hospital Personnel	569	(151)
Counselling Interviews with Patients, Families, Nursing Students, Other Hospital Personnel	105	(26)
Lectures, Seminars, Talks, Clinics, Etc.	47	(15)
Total Number of Visits and Interviews	2,248	(943)

WOMEN'S AUXILIARY



MRS. T. S. WILSON
*President
Women's Auxiliary*

The University Hospital Women's Auxiliary has again had a successful year.

Two new projects were started in 1963. In February, the "Aux" Cart began its rounds through the wards and has proved very popular with patients and staff.

In October, we opened a Flower stall in the lobby. This, we feel, has been a great boon to visitors and staff.

During the year, 281 volunteers donated 11,934 hours of their time. They have served in every area of the hospital under the capable direction of Mrs. Jean Rymal, Director of Voluntary Services.

The Auxiliary wish to thank the hospital administration and staff for their help and support during the year.

DEPARTMENT OF DIETETIC SERVICES



MISS I. TORRINGTON
Director of Dietetics

Comparative Meal Counts, Food Costs 1961—1963

Meal day count—	1961	1962	1963
Staff ----	182,136	175,150	183,433
Patients --	329,048	328,562	320,556
TOTAL Meal Days	511,184	503,712	503,989
RAW FOOD COST	\$466,992.76	\$466,488.06	\$473,372.84
AVERAGE Raw Food Cost Per Meal Day	91.35¢	92.61¢	93.94¢

SOCIAL SERVICE DEPARTMENT

At the administrative level much effort was spent in finding ways and means to integrate a program of action designed to help more people make positive use of their experience with ill health and hospitalization.

Staff supervision and consultation endeavored to increase the quality of performance while the quantity of demands kept going up and the staffing problem remained acute. There were over one hundred and twenty more referrals and over two thousand more interviews in 1963 than during the previous year.



MISS I. CHENARD, M.S.S.
*Director,
Social Service Dept.*

		Interviews			
		1962		1963	
Patients	In-Patient	1,797		2,928	
	O.P.D.	507		822	
	Others	203		351	
			2,507		4,101
Relatives of	In-Patient	923		907	
	O.P.D.	177		260	
	Others	246		292	
			1,346		1,459
Other Persons:					
Physicians, nurses, social workers from other agencies, employers, school teachers, etc.	In-Patient	1,464		1,532	
	O.P.D.	411		642	
	Others	251		421	
			2,126		2,595
GRAND TOTALS			5,979		8,155

Use of Community Resources

Total number of referrals made to various social agencies and services

		1962	1963
		559	641
Breakdown:			
In-Patient		302	446
Out-Patient	O.P.D.	148	167
	Others	25	28
No breakdown		84	--
		559	641

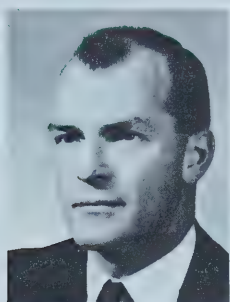
Breakdown for 1963:	In	O.P.D.	Others
Provincial Welfare -----	336	98	9
City Welfare -----	31	24	3
Family Services -----	4	—	2
Edmonton Rehabilitation -----	1	7	—
National Employment office --	19	23	7
Other Agencies -----			

77

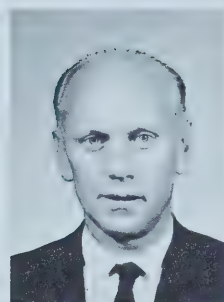
COMPARATIVE STATISTICAL REVIEW 1962 - 1963

ADMISSIONS		1962	1963
Total	-----	22,611	22,934
Private	-----	463	519
Semi-private	-----	4,038	3,283
Standard	-----	12,395	13,376
Out-patient Department	-----	1,651	1,743
Department Veterans' Affairs	-----	574	584
Staff	-----	75	91
Others	-----	3,415	3,338
Maximum Admissions any one day	-----	115	104
Minimum Admissions any one day	-----	23	26
Maximum Discharges any one day	-----	115	119
Minimum Discharges any one day	-----	20	18
Maximum in Hospital any one day	-----	1,040	1,084
Minimum in Hospital any one day	-----	630	642
Number of patients at beginning of year	-----	768	747
Total number of patients deceased during year	-----	652	592
Total number of patients at end of year	-----	745	732
Total number of patient days	-----	342,805	347,919
Daily average number of patients	-----	940	953
Average stay of patient (in days)	-----	14.66	14.69
BIRTH PLACE			
Canada	-----	17,128	17,521
British Isles	-----	2,056	1,930
U.S.A.	-----	1,079	1,053
Others	-----	2,348	2,430
BY DEPARTMENT			
Medical	-----	5,064	4,992
Surgical	-----	3,518	3,740
Obstetrical	-----	2,588	2,559
Gynaecological	-----	1,691	1,892
E.E.N. & T.			
Orthopaedic	-----	1,851	1,933
Dermatology	-----	1,753	1,691
Neuro-surgery	-----	119	128
Paediatrics	-----	669	655
Metabolic	-----	1,538	1,459
Genito-Urinary	-----	218	196
Cardiology	-----	1,044	1,101
Newborn	-----	240	251
	-----	2,318	2,337
X-RAY DEPARTMENT:			
Radiographs (films)	-----	152,075	176,100
Radiographs (examinations)	-----	46,572	47,840
Fluoroscopies	-----	4,651	4,867
X-Ray Treatments	-----	1,974	2,244
LABORATORY DEPARTMENT:			
Examinations	-----	354,801	421,467
B.M.R.'s	-----	292	164
E.C.G.'s	-----	7,302	8,427
Total	-----	362,395	426,458
OPERATIONS:			
Operating Rooms	-----	9,511	10,306
Cystoscopy Department	-----	2,043	3,479
Total	-----	11,554	13,785
OUT-PATIENT SERVICES:			
Total Visits	-----	146,600	144,671

UNIVERSITY HOSPITAL
ADMINISTRATIVE COMMITTEE



Dr. J. D. WALLACE
Executive Director



Dr. B. SNELL
Medical Superintendent



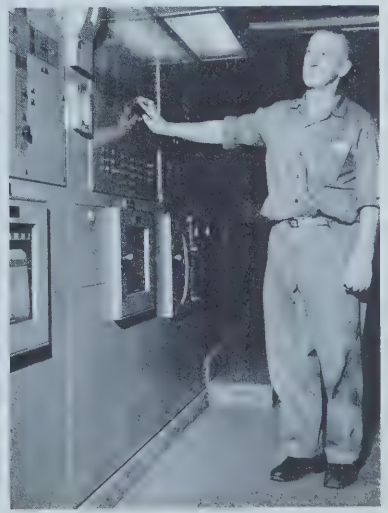
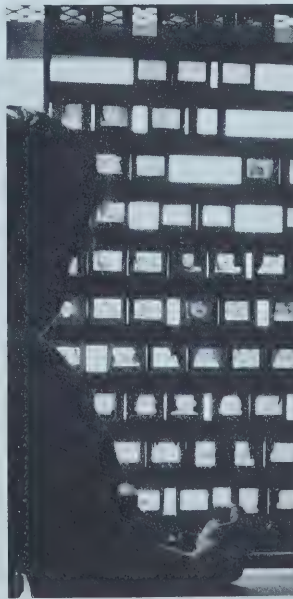
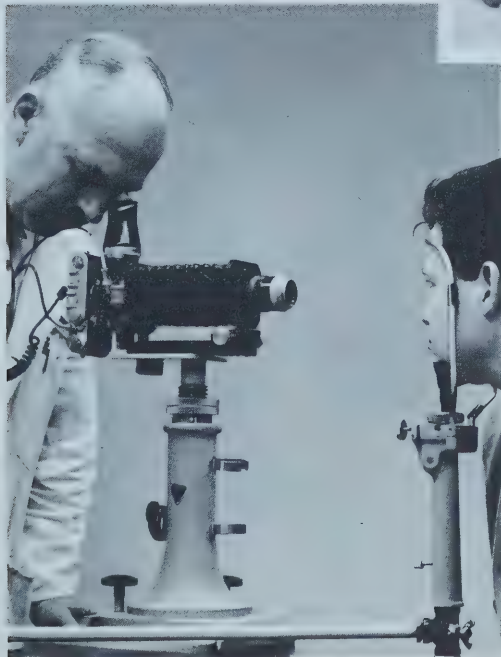
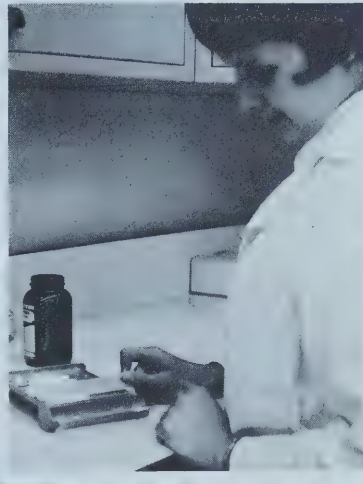
G. C. SHERWOOD
Business Administrator

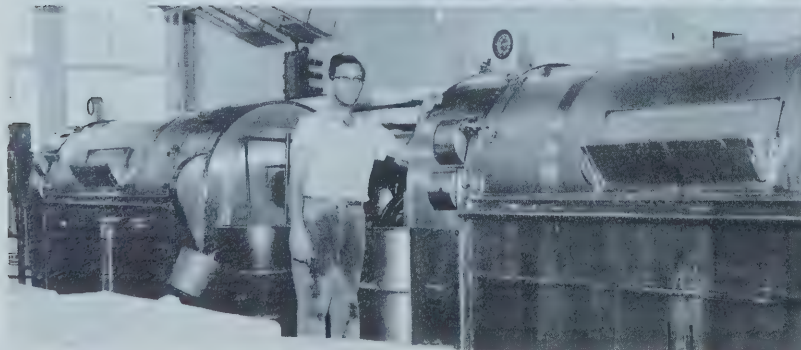


Miss M. G. PURCELL
Director of Nursing

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GOVERNMENT OF THE PROVINCE OF ALBERTA

OFFICE OF THE PROVINCIAL AUDITOR

REPORT AND ACCOUNTS

UNIVERSITY OF ALBERTA HOSPITAL BOARD

For the Year Ended December 31, 1963

C. K. HUCKVALE, F.C.A.

PROVINCIAL AUDITOR

**GOVERNMENT OF THE PROVINCE OF ALBERTA
OFFICE OF THE PROVINCIAL AUDITOR**

University of Alberta Hospital Board
Edmonton, Alberta

Edmonton, March 10, 1964

I have audited the books and records of the University of Alberta Hospital Board for the year ended December 31, 1963. Attached hereto are the following statements and schedules:

Statement	Particulars
A.	Balance Sheet
B.	Statement of Revenue Surplus
C.	Statement of Capital Surplus
D.	Statement of Revenue and Expenditure
Schedule	
1.	Schedule of Special Services and Service Departments Revenues
2.	Schedule of Salaries and Wages
3.	Schedule of Supplies and Direct Expenses
4.	Schedule of Administration and Plant Operation Expenses
5.	Schedule of Research Expenditures and Recoveries

Operations for the year ended December 31, 1963 are summarized in Statement D and are subject to approval of the Department of Public Health, Hospitals Division, for final determination of contributions from the Province of Alberta under the Hospitalization Benefits Plan. Specifically an amount of \$460,963.52, as stated elsewhere in this report, is subject to such approval.

No depreciation has been provided on buildings, furniture or equipment. The Hospitalization Benefits Plan will provide funds for acquirement and replacement of approved furniture and equipment and for retirement of debt incurred in the acquirement of capital assets. In addition thereto expenditures were incurred during the year for additions to and replacement of furniture and equipment and improvements to buildings in an amount of \$24,444.99 from Hospital reserves and donated funds.

Accounts receivable under the Hospitalization Benefits Act are shown in the amount of \$781,969.26, and are comprised of the following:

Capital charges accrued	\$ 99,145.44
Less: Capital charges accrued, payable to Province of Alberta	99,145.44
	<u>\$ —</u>
Acquisition and replacement of furniture and equipment	75,433.76
Improvements to buildings	13,983.79
Excess of net operating cost over basic payments received	623,858.66
Uncollectable accounts	68,693.05
	<u>\$ 781,969.26</u>

The amount of \$623,858.66 shown above as receivable under the Hospitalization Benefits Act includes amounts of \$9,020.38 and \$460,963.52 in respect of the years ended December 31, 1961 and December 31, 1963 respectively, which have not at this date been approved under the Hospitalization Benefits Plan and the collection of these amounts is subject to such approval.

Inventories of supplies on hand were certified as to quantities and prices by officials of the Hospital.

Trust investments held in safekeeping at the Canadian Imperial Bank of Commerce, Edmonton, under joint custody of two officials of the Hospital, were verified by examination and are summarized hereunder:

	Par Value	Book Value
Government of Canada bonds	\$ 555,000.00	\$ 554,675.00
Provincial debentures, direct and guaranteed	862,000.00	855,601.02
Common Shares	2,600.00	1.00
	<u>\$ 1,419,600.00</u>	<u>\$ 1,410,277.02</u>

The market value of bonds and debentures amounted to approximately \$1,341,000.00 as at December 31, 1963.

Transactions in the Hospital reserve trust are as undernoted:

Balance as at January 1, 1963	\$ 941,959.81
Add:	
Interest earnings	\$ 38,586.56
Rental earnings, net	4,577.63
	<u>43,164.19</u>
	<u>\$ 985,124.00</u>
Deduct:	
Nursing survey, salaries	\$ 8,964.75
Improvements to buildings	3,418.69
Furniture and equipment	3,526.10
	<u>15,909.54</u>
Balance as at December 31, 1963	<u>\$ 969,214.46</u>

Subject to the foregoing, I certify that, in my opinion, the attached Balance Sheet is properly drawn up so as to show the true financial position of the University of Alberta Hospital Board as at December 31, 1963, according to information and explanations given to me and as shown by the books of the Board, and the accompanying Statement of Revenue and Expenditure correctly sets forth the result of operations for the year ended at that date.

C. K. HUCKVALE, F.C.A.,
Provincial Auditor.

UNIVERSITY OF ALBERTA

BALANCE SHEET AS AT

ASSETS

Revenue Funds:

Cash on hand -----	\$	19,738.31	
Cash in treasury branch and banks -----		108,112.21	
		<u> </u>	\$ 127,850.52

Accounts receivable:

Civilian patients -----	\$	363,950.74	
Less: Allowance for doubtful accounts -----		87,959.38	
		<u> </u>	
	\$	275,991.36	
Hospitalization Benefits Act, net		781,969.26	
Government of Canada -----		102,415.24	
Province of Alberta -----		56,048.35	
Workmen's Compensation Board		26,855.40	
Municipalities -----		5,952.30	
Due from trust funds -----		33,373.60	
Miscellaneous -----		9,473.82	
		<u> </u>	1,292,079.33

Inventories -----		332,106.23	
Prepaid expenses -----		5,005.06	
Deposit with Workmen's Compensation Board -----		4,788.64	
		<u> </u>	\$ 1,761,829.78

Plant Funds:

Land and buildings, at cost -----	\$15,748,116.97	
Furniture and equipment, at cost -----	3,865,090.98	
	<u> </u>	

Trust Funds:

Cash on hand and in banks -----	\$	85,741.61	
Accounts receivable -----		40,103.28	
Bonds and debentures, at book value -----		1,410,276.02	
Common shares, nominal value -----		1.00	
Accrued interest -----		13,432.29	
		<u> </u>	1,549,554.20
			<u> </u>
			\$22,924,591.93

This is the Balance Sheet referred to in the report
addressed to the University of Alberta

ALBERTA HOSPITAL BOARD

DECEMBER 31, 1963

LIABILITIES

Revenue Funds:

Bank overdraft -----	\$	73,851.88	
Bank loan -----		140,000.00	
Accounts payable -----		265,164.39	
Salaries and wages payable -----		33,632.41	
			\$ 512,648.68
Deferred income -----			4,895.00
Agreement of sale, deposit -----			6,500.00
Employees' group insurance reserve -----			62,604.14
Workmen's Compensation Board reserve -----			46,931.82
Revenue surplus, as per Statement B -----			923,704.39
			\$ 1,557,284.03

Plant Funds:

Reserve for equipment -----	\$	42,934.99	
Capital surplus, as per Statement C -----		6,783,324.97	
			6,826,259.96

Capital:

Provided by the Province of Alberta -----		12,991,493.74
		\$21,375,037.73

Trust Funds:

Due to revenue funds -----	\$	33,373.60	
Hospital reserve trust -----	\$	969,214.46	
General trusts -----		497,150.64	
Medical professional services trust -----		40,103.28	
Patients' trust -----		9,712.22	
			1,516,180.60
			1,549,554.20
			<u>\$22,924,591.93</u>

in my report of March 10, 1964
of Alberta Hospital Board.

C. K. HUCKVALE, F.C.A.

Provincial Auditor.

GOVERNMENT OF THE PROVINCE OF ALBERTA

UNIVERSITY OF ALBERTA HOSPITAL BOARD

STATEMENT OF REVENUE SURPLUS

For the Year Ended December 31, 1963

Revenue surplus as at January 1, 1963 -----	\$ 917,952.91
Add: Adjustment applicable to previous years:	
Reduction of allowance for doubtful accounts -----	7,644.71
	<u>\$ 925,597.62</u>
Deduct: Deficit for the year ended December 31, 1963 -----	1,893.23
Revenue surplus as at December 31, 1963 -----	<u><u>\$ 923,704.39</u></u>

GOVERNMENT OF THE PROVINCE OF ALBERTA

UNIVERSITY OF ALBERTA HOSPITAL BOARD

STATEMENT OF CAPITAL SURPLUS

As at December 31, 1963

Capital surplus:

Arising from:

Hospitalization Benefits Act:

Repayment of capital advances by the
Province of Alberta ----- \$ 2,497,323.26

Assets provided ----- 1,853,298.79

\$ 4,350,622.05

Assets provided from hospital funds ----- 1,418,798.97

Assets provided from construction grants ----- 686,770.82

Assets provided from donations ----- 327,133.13

Capital surplus as at December 31, 1963 ----- \$ 6,783,324.97

GOVERNMENT OF THE PROVINCE OF ALBERTA

UNIVERSITY OF ALBERTA HOSPITAL BOARD

STATEMENT OF REVENUE AND EXPENDITURE

For the Year Ended December 31, 1963

REVENUE

General services, including wards and rooms -----	\$ 1,197,356.00	
Special services and service departments, as per Schedule 1 -----	763,347.00	\$ 1,960,703.00
Department of Veterans' Affairs, in-patients -----		514,907.00
Rentals revenue -----		41,679.05
Miscellaneous revenue -----		8,464.95
		<u>\$ 2,525,754.00</u>

EXPENDITURE

Salaries and wages, as per Schedule 2 -----	\$ 5,644,653.99	
Supplies and direct expenses, as per Schedule 3 -----	2,346,865.29	7,991,519.28
Net basic operating cost -----		\$ 5,465,765.28
Debt charges:		
Capital -----	\$ 598,638.75	
Interest -----	514,103.94	1,112,742.69
Acquirement and replacement of furniture and equipment -----		145,453.83
Improvements to buildings -----		85,981.08
Provision for doubtful accounts -----		96,020.37
Net operating cost under the Hospitalization Benefits Act -----		\$ 6,905,963.25
Deduct: Contributions claimed under the Hospitalization Benefits Act re:		
Basic operating cost -----	\$ 5,465,765.28	
Debt charges -----	1,112,742.69	
Furniture and equipment -----	145,453.83	
Improvements to buildings -----	85,981.08	
Provision for doubtful accounts -----	96,020.37	6,905,963.25
Research:		
Salaries and direct expenses, as per Schedule 5 -----	\$ 195,602.61	
Deduct: Recoveries, as per Schedule 5 -----	195,602.61	
Interest expense, net -----		\$ 1,893.23
Deficit for the year ended December 31, 1963 -----		<u>\$ 1,893.23</u>

UNIVERSITY OF ALBERTA HOSPITAL BOARD

SCHEDULE OF SPECIAL SERVICES AND SERVICE DEPARTMENTS REVENUES

For the Year Ended December 31, 1963

Cafeteria and sundry meals	\$ 209,634.03
X-ray	140,045.60
Clinical laboratories	133,696.61
Emergency	78,143.85
Rehabilitation	49,988.93
Pharmacy	42,419.65
Orthopaedic	38,420.61
Photography	20,878.83
Radioisotope	18,522.84
Cystoscopy	14,246.00
Laundry	7,528.80
Pulmonary function	4,430.50
Operating room	1,866.40
Shock therapy	1,491.00
Orthoptic	1,235.70
Linen	413.65
Renal unit	384.00
	<u>\$ 763,347.00</u>

UNIVERSITY OF ALBERTA HOSPITAL BOARD

SCHEDULE OF SALARIES AND WAGES

For the Year Ended December 31, 1963

Administration	\$ 380,269.89
General services, including wards and rooms	2,037,738.07
Special services:	
Education of students and internes	\$ 662,408.32
Operating room	277,746.32
Clinical laboratories	268,444.27
Rehabilitation	169,312.53
X-ray	161,762.63
Medical records	74,691.00
Delivery room	73,532.29
Emergency	52,546.73
Out-patient department	52,189.99
Pharmacy	50,632.76
Social service	36,449.20
Cardio surgery	31,534.14
Blood cross matching	27,129.60
Radioisotope	21,670.08
Psychiatry	20,485.89
Cystoscopy	20,288.20
Inhalation therapy	19,345.00
Renal unit	14,104.64
Photography	14,032.07
Metabolic unit	12,832.22
Steroid laboratory	12,672.63
Orthopaedic	12,310.68
Cardio medicine	11,205.61
Blood transfusion	9,360.00
Pulmonary function	7,766.55
Orthoptic	4,134.42
	<u>\$ 2,118,587.77</u>
Service departments:	
Dietary	\$ 374,761.72
Housekeeping	334,678.70
Laundry	147,295.63
Linen	44,315.14
	<u>901,051.19</u>
Plant operation:	
Buildings and grounds maintenance	207,007.07
	<u>\$ 5,644,653.99</u>

UNIVERSITY OF ALBERTA HOSPITAL BOARD**SCHEDULE OF SUPPLIES AND DIRECT EXPENSES**

For the Year Ended December 31, 1963

Administration, as per Schedule 4		\$ 279,325.86
General services, including wards and rooms		332,936.90
Special services:		
Operating room	\$ 212,882.21	
Education of students and internes	186,267.33	
X-ray	98,835.80	
Clinical laboratories	63,839.54	
Pharmacy	46,562.22	
Out-patient department	40,503.64	
Orthopaedic	34,669.58	
Cardio surgery	25,129.10	
Cystoscopy	23,405.70	
Intravenous	23,215.23	
Emergency	18,555.35	
Renal unit	16,993.02	
Delivery room	16,450.46	
Oxygen	15,722.73	
Radioisotope	11,527.96	
Rehabilitation	10,984.20	
Blood cross matching	6,953.87	
Medical records	6,120.82	
Inhalation therapy	5,989.44	
Pulmonary function	5,013.11	
Cardio medicine	4,529.72	
Photography	4,126.20	
Steroid laboratory	3,128.74	
Psychiatry	1,261.14	
Blood transfusion	741.84	
Orthoptic	670.41	
Social service	314.95	
Metabolic unit	104.78	
		884,499.09
Service departments:		
Dietary	\$ 516,162.99	
Laundry	44,047.25	
Housekeeping	39,833.83	
Linen	23,985.38	
		624,029.45
Plant operation, as per Schedule 4		226,073.99
		<u>\$ 2,346,865.29</u>

Schedule 4

UNIVERSITY OF ALBERTA HOSPITAL BOARD**SCHEDULE OF ADMINISTRATION AND PLANT OPERATION EXPENSE**

For the Year Ended December 31, 1963

ADMINISTRATION		
Pension fund contributions	\$ 118,384.70	
Printing, postage and office supplies	41,015.56	
Telephone and telegraph	26,691.59	
Workmen's Compensation Board	20,000.04	
Regulatory and security services	18,541.40	
Audit fees	9,000.00	
Office equipment maintenance	7,595.53	
Blue cross	6,961.20	
Legal	6,488.14	
Insurance	5,879.71	
Cartage and transportation	4,361.48	
Travelling	3,170.22	
Association fees	3,071.99	
Disaster planning	2,696.83	
Miscellaneous	5,467.47	
	<u>\$ 279,325.86</u>	
PLANT OPERATION		
Electricity	63,878.40	
Buildings maintenance, including alterations	54,875.21	
Steam and gas	51,742.93	
Water	28,790.22	
Equipment maintenance	16,518.17	
Grounds maintenance	5,466.25	
Insurance	4,155.89	
Miscellaneous	646.92	
	<u>\$ 226,073.99</u>	

For the Year Ended December 31, 1963

[illegible]